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UNITED STATES DISTRICT COURT
DISTRICT OF OREGON
PORTLAND DIVISION

JAROD BOWMAN, JOSHAWN
DOUGLAS-SIMPSON;

Case No. 3:21-cv-01637

Plaintiffs,

MOTION FOR TEMPORARY RESTRAINING ORDER

VS.

FRCP 65(a)

DELORES MATTEUCCI, Superintendent of the Oregon State Hospital, in her official capacity, PATRICK ALLEN, Director of the Oregon Health Authority, in his official capacity.

Defendant.

INTRODUCTION

1. Plaintiffs bring this action for a temporary restraining order in order to remedy their continuing, indefinite, unconstitutional incarceration in jail in violation of the state trial court's orders committing plaintiffs to the Oregon State Hospital.

MOTION FOR PRELIMINARY INJUNCTION - 1

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1 2. Plaintiffs have been sitting in the Multnomah County Detention Center, jailed
2 and housed as criminals even though nearly eight months ago for plaintiff Bowman and nearly
3 six months ago for plaintiff Douglas-Simpson a Multnomah Circuit Court Judge adjudicated
4 plaintiffs as “guilty except for insanity” (GEI) and ordered them transported to the Oregon State
5 Hospital without unreasonable delay.

6 3. Despite these orders, defendants refused to transport plaintiffs. Frustrated,
7 plaintiffs went back to the trial court twice and asked the court to hold the defendants in
8 contempt each time and asked the court to order the defendants to immediately transport them
9 to the Oregon State Hospital. In defense of the contempt actions, defendants asserted that the
10 Oregon State Hospital *cannot* comply with the court’s orders because 1) the Oregon State
11 Hospital is at 95% capacity, and 2) an injunction from the Federal District Court ordered the
12 Oregon State Hospital to prioritize the admission of another class of committed patient – those
13 unable to aid and assist – over patients found to be GEI. Both times, the trial court rejected the
14 defendants’ defenses and found the defendants in contempt. The trial court found that the
15 Oregon State Hospital had space to admit plaintiffs and found that the defendants committed
16 willful contempt in failing to transport plaintiffs despite the preexisting federal injunction. As a
17 part of each of its contempt judgments the trial court ordered the defendants to transport
18 plaintiffs to the Oregon State Hospital within a few days of each order. The defendants have
19 ignored both of the court’s orders to transport plaintiffs to the Oregon State Hospital and
20 plaintiffs remain in the Multnomah County Jail.
21

22 4. Plaintiffs, as inmates at the Multnomah County Jail, have limited access to
23 mental health resources. Neither has a treating psychiatrist or psychologist at the jail. They have
24

1 no access to individual or group therapy at the jail. They have no access to other forms of
 2 therapy at the jail. Unlike at the Oregon State Hospital, they have no access to outdoor walks or
 3 reasonable recreation; they may not wear their own clothes at the jail, their bedtimes are firm at
 4 the jail; in jail, their cells have doors on them that lock; at the jail they cannot possess their own
 5 money and bring things from home. Unlike at the hospital, their family cannot send them care
 6 packages while at the jail.

7 5. The jail is not in the same business as the Oregon State Hospital. The jail is for
 8 housing people with pending criminal cases who are deemed a flight risk or dangerous to the
 9 community and the jail is for people convicted of crimes. The jail's job is to punish and restrain.
 10 (Exhibit A). In contrast, the Oregon State Hospital's job is to provide mental health treatment
 11 and therapy. Its job is to transition people to the community when they are well enough to be
 12 released. (Exhibit B). Plaintiff Douglas-Simpson's mental health has not improved at the jail
 13 and Plaintiff Bowman's mental health has markedly declined while in custody. His untreated
 14 post-traumatic stress disorder led to a fight and now his higher security level in jail-this means
 15 he has even fewer opportunities for social interaction and recreation. When he attends court, he
 16 is considered a high security prisoner, a "call for." When plaintiff Bowman appears in court,
 17 the court orders that he wear leg restraints and belly chains.
 18

CONTINUING DUE PROCESS VIOLATIONS

20 6. The defendants have imprisoned plaintiffs in a punitive setting, indefinitely,
 21 without adequate mental health treatment resources, in violation of the trial court's order for
 22 defendants to transport plaintiffs to the Oregon State Hospital. Defendants have therefore
 23 denied and continue to deny plaintiffs their substantive due process rights to liberty.
 24

1 AUTHORITY

2 7. Pursuant to FRCP 65(a), plaintiffs move this Court for a temporary restraining
3 order directing defendants to immediately transport plaintiffs to the Oregon State Hospital for
4 custody, care, and treatment, with said Order to expire the moment the Oregon State Hospital
5 accepts custody of plaintiffs for care and treatment.

6 QUESTION PRESENTED

7 Whether a temporary restraining order should be granted where:

- 8 (a) Plaintiffs are likely to succeed on their claim that defendants' violated plaintiffs'
9 Fourteenth Amendment, Due Process Rights by failing to transport them to the
10 Oregon State Hospital and allowing them to remain jailed after they have both
11 been adjudicated GEI almost six and eight months prior to the filing of this motion.
12
(b) Plaintiffs will suffer irreparable harm, loss or damage in the absence of a
13 temporary restraining order because they will continue to be unconstitutionally,
14 punitively and indefinitely jailed and denied mental health treatment.
15
(c) The balance of hardships weighs in favor of relief because the ongoing irreparable
16 harm to plaintiffs outweighs any potential hardship to defendants; and
17
(d) Granting the temporary restraining order is in the public interest.

18 ARGUMENT

19 8. A party seeking a temporary restraining order or preliminary injunction must
20 show that: "(1) they are likely to succeed on the merits, (2) they are likely to suffer irreparable
21 harm, (3) the balance of hardships tips in their favor, and (4) the temporary restraining
22 order/injunction is in the public interest." *Winter v. Nat'l Res. Def. Council, Inc.*, 555 U.S. 7,
23
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1 20 (2008); *Sammartano v. First Judicial District Court*, 303 F.3d 959, 974 (9th Cir. 2002). Each
 2 of these factors support plaintiffs' request for injunctive relief.

3 PLAINTIFFS ARE LIKELY TO SUCCEED ON THEIR CLAIM

4 9. Defendants have restrained plaintiffs indefinitely in a punitive jail setting and
 5 denied them treatment despite being adjudicated GEI. As such, the defendants' actions violate
 6 plaintiffs' substantive due process rights and they are likely to succeed on their claims of
 7 constitutional deprivation.

8 10. First, "freedom from bodily restraint has always been at the core of liberty
 9 protected by the Due Process Clause from arbitrary governmental action." *Louisiana v. Foucha*,
 10 504 U.S. 71, 79 (1992) (*citing Youngberg v. Romeo*, 457 U.S. 307, 316 (1982)). Due process
 11 requires that a court consider the constitutionality of a person's detention in light of the
 12 detention's purpose and determine whether the nature and duration of the detention is
 13 reasonably related to the purpose for which that person was detained. *Jackson v. Indiana*, 406
 14 U.S. 715, 737 (1972). Institutionalized persons have a substantive due process liberty interest
 15 in reasonable care and safety, reasonably non-restrictive confinement conditions, and such
 16 treatment as may be required to fully comport with the purpose of confinement. *Youngberg v.*
 17 *Romeo*, 457 U.S. 307, 319 (1982). A person who is found to be guilty by reason of insanity may
 18 not be punished. "His confinement rests on his continuing illness and dangerousness." *Jones v.*
 19 *United States*, 463 U.S. 354, 369 (1982). A detainee who has been adjudicated as guilty by
 20 reason of insanity may only be held so long as he is both suffering from a mental disease and is
 21 dangerous. *Louisiana v. Foucha*, 504 U.S. 71 (1992).

1 11. Plaintiffs have been punitively incarcerated in a jail setting for months. Plaintiff
2 Bowman has been incarcerated for almost eight months and plaintiff Douglas-Simpson for
3 almost six months after the trial court committed them to the Oregon State Hospital for custody,
4 care and treatment of their mental health disorders. Jailed, and un-hospitalized, plaintiffs have
5 been kept away from constitutionally required mental health treatment necessary to cure or
6 mitigate their mental illnesses and to mitigate any danger they present to themselves or others.
7 Their present imprisonment bears no reasonable relationship to the purpose of their
8 commitment. Instead, the defendants are unconstitutionally punishing them. In jail, they are
9 treated as inmates with greatly limited civil rights and very limited access to services and
10 visitation. If they were to be hospitalized at the Oregon State Hospital as the trial court has
11 ordered, they would be essentially released from the confines of jail and instead held as medical
12 patients with far greater civil rights, freedoms and with a treatment team ready to help them.

14 12. A federal court has already found that similar deprivations to a similar class of
15 defendants amounted to unconstitutional due process violations. In *OAC v. Mink*, 3:02-cv-
16 00339-PA, Judge Panner took up a case in which a class of plaintiffs – pre-trial detained who
17 had been found unable to aid and assist in their own defense – had been housed for extended
18 periods in local jails extending from weeks to months. Judge Panner found this detention
19 unconstitutionally violated due process and ordered Mr. Mink, the superintendent of the Oregon
20 State Hospital to admit plaintiffs and similarly situated persons to “a state mental hospital or
21 other treatment facility . . . not later than seven days after the issuance of an order determining
22 a criminal defendant to be unfit to proceed to trial because of mental incapacities.” *Mink*, 3:02-
23 cv-00339PA, document 47.

13. The only difference between the *Mink* case and the present case is that plaintiffs have been adjudicated “guilty except for insanity” and the *Mink* plaintiffs were found unable to aid and assist in a pre-trial context. In both cases, the plaintiffs are/were mentally ill and had been committed for mental health treatment. In each case, the plaintiffs had been housed in punitive jail settings with no available mental health treatment.

14. For these reasons, plaintiffs are highly likely to prevail on their due process claims against defendants.

PLAINTIFF WILL SUFFER IRREPARABLE HARM IN THE ABSENCE OF A
TEMPORARY RESTRAINING ORDER.

15. Without a temporary restraining order, plaintiffs will continue to be unconstitutionally jailed while unable to engage in mental health treatment and without the ability to contest the underlying reasons for their continued detention. The deprivation of any constitutional right is alone sufficient to establish irreparable harm. *See, e.g., Elrod v. Burns*, 427 U.S. 347, 373 (1976) (plurality opinion); *Melendres v. Arpaio*, 695 F.3d 990, 1002 (9th Cir. 2012) (quoting *Elrod v. Burns*, 427 U.S. 347, 373 (1976)). Nowhere is this more clearly established than where a person is incarcerated in violation of his or her constitutional rights. *See Zadvydas v. Davis*, 533 U.S. 678, 290 (2001); *see also Foucha*, 504 U.S. at 80; *Hernandez v. Sessions*, 872 F.3d 976, 994 (2017). Courts have even upheld a finding of irreparable harm when the plaintiff shows a “real possibility” that they would be stopped or detained and subjected to unlawful detention. *Melendres*, 695 F.3d at 1002. Plaintiffs are presently unlawfully detained in jail rather than the court ordered hospital. They have been and continue to be unlawfully punished. Each day they remain in jail is a day of their lives that they could have lived with fewer restrictions, no punishment, the significant benefit of mental health

1 treatment, and the possibility of release. Without the intervention of a federal court plaintiffs
 2 will remain indefinitely, unconstitutionally detained. This will result in irreparable harm.

3 THE BALANCE OF HARDSHIPS WEIGHS IN FAVOR OF GRANTING PRELIMINARY
 4 INJUNCTIVE RELIEF

5 16. The ongoing and serious harm to plaintiffs considerably outweighs any potential
 6 harm to the defendants. Without immediate relief, plaintiffs will continue to be housed in jail
 7 and not the clinical setting of a hospital. Plaintiffs will be unable to access treatment, unable to
 8 progress to a point where they are releasable, and unable to contest their commitment. Plaintiffs
 9 will also continue to be subjected to unlawful punishment for crime they were never convicted
 10 of committing. Defendants will certainly be inconvenienced in that they will need to admit
 11 plaintiffs to the Oregon State Hospital but beds are available for them. This temporary
 12 restraining order may even favor the defendants by giving the defendants reasons and arguments
 13 they can use to obtain more funding to open more facilities, hire more staff and provide the
 14 services they are constitutionally mandated to provide. The hardships forced upon plaintiffs
 15 without this temporary restraining order will cause irreparable harm by subjecting them to
 16 punitive, lengthy and indefinite detention. No hardship will be imposed upon the defendants.
 17 The balance of hardships therefore favor this temporary restraining order.

18 GRANTING A TEMPORARY RESTRAINING ORDER IS IN THE PUBLIC INTEREST

19 17. “It is always in the public interest to prevent the violation of a party’s
 20 constitutional rights.” *Sammartano v. First Judicial District Court*, 303 F.3d 959, 974 (9th Cir.
 21 2002)(quoting *G & V. Lounge, Inc. v. Mich. Liquor Control Comm’n*, 23 F.3d 1071, 1079 (6th
 22 Cir. 1994). Here, defendants’ continued refusal to transport plaintiffs will continue to result in
 23
 24

the violation of plaintiffs' fundamental constitutional rights. It is in the public interest to prevent such a violation.

18. This extended, indefinite and unlawful detention has significant negative consequences for society. Without a therapeutic mental health program, plaintiffs have little hope of curing their mental illnesses. Without treatment, plaintiffs may never return to society as productive citizens who can care for their children, contribute to society, and pay their share. Instead, plaintiffs' indefinite incarceration only costs society money, delays their therapy and delays their ability to rejoin society. The public interests abhors the unconstitutional, indefinite incarceration of mentally ill persons. This restraining order will serve the public interest by compelling the defendants to transport plaintiffs to the Oregon State Hospital, a secure facility where plaintiffs will receive mental health treatment.

CONCLUSION

For the reasons stated, this Court should grant plaintiffs' motion for a temporary restraining order. Plaintiffs respectfully request that this Court order the relief set forth in the accompanying order.

DATED this 9th day of November, 2021.

By: s/ Ethan Levi
Ethan Levi, OSB No. 994255
Attorney for Plaintiffs

MULTNOMAH COUNTY CORRECTIONS INMATE MANUAL 2018

A MESSAGE TO INMATES FROM THE SHERIFF

The purpose of this manual is to provide you and those interested the rules and guidelines that we use to keep Multnomah County Jails safe, orderly, and clean. It describes what you can expect for living conditions and treatment you receive while you are in our facilities. It also explains some of your rights and the positive, adult behavior we expect from you. You can expect fair and equal treatment from us and respect for your rights. This manual is also a useful reference guide with answers to many common questions that inmates have about being in custody.

It is our responsibility to keep you safe while maintaining a healthy, safe and secure environment in our facilities. It is your responsibility to follow the rules and instructions in this manual and follow directions given to you by Sheriff's Office staff members.

We encourage you to familiarize yourself with the policies and expectations in this manual, as they are the basis for conduct that will result in your safety and security.

While in custody, if you are in doubt of what you should do, it is your responsibility to ask a deputy. You can make your stay here more productive if you follow the rules of the facility and the instructions given to you by staff members.



Sheriff Michael Reese

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INTRODUCTION

It is your responsibility to read this manual and to know what we expect of you. We will not accept the excuse, "I didn't know." It is your responsibility to follow all laws, jail rules, staff orders and schedules. You must tell us if you have a disability that can affect your ability to follow orders, fill out forms, perform tasks, or take advantage of programs / privileges, so staff can assist you.

An inmate information board is posted in all inmate housing areas. The board includes information about facility rules, useful phone numbers, addresses, housing unit schedules, and other information that will be helpful to you, and assist you during your custody.

It is your responsibility to check the inmate information board in your housing unit regularly for new or changed rules and procedures, schedules, changes to this manual and specific rules for your housing area. If you have any questions regarding your responsibilities while in custody ask a deputy. If you have questions regarding the status of your custody, case or conditions of the courts you need to contact your attorney, your parole / probation officer or a program staff member who can assist you.

PRISON RAPE ELIMINATION ACT (PREA)

The Sheriff's Office has zero tolerance for any incident of sexual assault, attempted sexual assault, sexual contact, attempted sexual contact or sexual harassment. This includes inmates, staff or visitors.

Sexual conduct between any persons in the jail, even if it is consensual, is prohibited. Inmates are subject to disciplinary sanctions / criminal prosecution, following a finding that the inmate engaged in inmate-on-inmate sexual abuse.

Sexual Abuse

Defined:

1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
2. Contact between the mouth and the penis, vulva, or anus;
3. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
4. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

Prohibited Conduct

1. Any sexual action including consensual sexual behavior;
2. Any sexual advance, request for sexual favors or attempted sexual act;
3. Making threats or retaliating for refusal of sexual advances;
4. Verbal or physical conduct of a sexual nature toward or with another person;
5. Invasion of privacy beyond that which is reasonable or necessary;
6. Touching of another inmate to gratify sexual desire;
7. Voyeurism for sexual gratification;
8. Indecent exposure or masturbation;
9. Any inappropriate behavior of a sexual nature.

Sexual Harassment

Defined: Repeated and unwelcome sexual advances, comments, gestures or actions of derogatory or offensive sexual nature.

Sexual harassment includes:

- Demeaning references to a person's gender or sexual orientation;
- Sexually suggestive or derogatory comments about a person's body or clothing;
- Abusive, threatening, profane or degrading sexual comments or gestures;
- Jokes about sex or gender specific traits.

You are expected to report sexual misconduct/abuse immediately if you are a victim while in the jail or if you see others doing it. You may report it verbally by telling any staff member (i.e. corrections staff, counselor, chaplain, or medical provider) or in writing, by service request form (KYTE) to the jail detective. You may report it confidentially or anonymously, or to a public or private entity that is not a part of this agency. Use the method which you feel most comfortable. We will take the report seriously and investigate it, even if reported by third parties such as fellow inmates, family members, and attorneys or outside advocates. Third party complaints can be reported by calling 503-227-2010.

Making a false report of sexual misconduct will subject you to disciplinary action and possible criminal charges.

If you are the victim of a sexual assault do not: shower, wash areas of your body, use the toilet, brush your teeth or wash clothes or underwear. This could wash away hair or other bodily fluids that are critical evidence. Save anything that touched the person who assaulted you or anything the person left behind.

MCSO will take immediate action to protect you from further abuse, gather evidence of the assault and make sure you receive immediate medical attention and treatment.

We shall attempt to make available an advocate from a rape crisis center for current sexual abuse cases. If you have been a victim of sexual abuse in or out of custody, you may contact Call to Safety at 1-888-235-5333 toll free for confidential emotional support. You can also write to Call to Safety at P.O Box 42610 Portland OR 97242 to request information for emotional support (follow the mail policy when sending out these confidential letters).

It is our responsibility to ensure that all inmates who report sexual abuse / sexual harassment or cooperate with investigations are protected from retaliation by other inmates or staff. This can include a classification, and or housing assignment change, which is to prevent further abuse and or retaliation. When the investigation into a sexual abuse allegation is complete the inmate shall be informed whether it has been determined to be substantiated, unsubstantiated or unfounded.

Rights

You will have the opportunity to exercise the following rights in accordance with State and Federal law. The Multnomah County Sheriff's Office also follows Oregon Jail Standards for operating a jail. While you are here you will have:

- Opportunity to reasonably practice your religion;
- Access to legal materials;
- Access to legal counsel and the courts;
- Access to medical and dental treatment;
- Opportunity to contact your consulate if you are a foreign national;
- A safe, secure, clean and functional facility environment;
- A way for your complaints to be heard and addressed.

Conditions of Confinement

Each of these will meet or exceed Oregon Jail Standards. You will receive:

- Three nutritionally adequate meals served daily at reasonable intervals;
- Clean clothing at least twice a week;
- Clean bedding (sheets and pillow case) at least once a week;
- Opportunities to shower at least twice a week;
- Basic hygiene items provided if you cannot afford them;
- Access to essential grooming tools;
- Opportunity for active exercise.

Privileges

If you follow jail rules, behave properly, and meet sanitation standards, you may be allowed to engage in the following activities:

- Use of television;
- Taking part in leisure activities;
- Use of the outdoor exercise area;
- Use of the telephone;
- Having social visits;
- Making commissary purchases;
- Sending and receiving mail;
- Receiving newspapers (MCIJ);
- Taking part in voluntary jail programs, if you meet eligibility requirements;
- Being an inmate worker, if you meet eligibility requirements.

Jail staff can limit or suspend these activities at any time to maintain the safety, security, or orderly operations of the jail. Your classification and housing assignment may also affect your ability to participate in these activities based upon safety and security.

Expectations

We expect you to:

- Read and follow all facility and program rules stated in this manual and posted in the facilities. Ask corrections deputies and / or counselors to explain information and rules that you do not understand;
- Follow all directions from staff. Keep conversations with staff professional;
- Behave properly, treating everyone with courtesy and respect. Use respectful language, tone of voice, and body language when dealing with others. We will not tolerate profane, sexually suggestive, or other inappropriate language or gestures;
- Show respect for jail property and the property of others. We expect you to keep your cell or bunk area and housing unit areas neat and clean;
- Practice good personal hygiene. This includes taking showers regularly, brushing your teeth, washing your hands frequently, and exchanging dirty clothing and bedding for clean ones at the designated times;
- We will manage unacceptable behavior, firmly, and fairly. Misbehavior will result in informal or formal discipline, and possible criminal charges. The best control of your behavior is self-discipline.
- You will be supervised by both male and female deputies. You must remain fully clothed unless you are taking a shower (only remove your clothing when inside the shower stall). While working out, you must wear your T-shirt but you may remove your blue shirt. You may also remove your blue shirt and blue pants at night as long as you are covered by sheets or blankets.

AMERICANS WITH DISABILITIES ACT OF 1990 (ADA)

In accordance with the requirements of Title II of the Americans with Disabilities Act (ADA), the Sheriff's Office prohibits discrimination on the basis of disability. The Sheriff's Office ensures reasonable accommodations for disabled inmates regarding all services, programs and activities provided and/or made available to those in custody. No qualified person with a disability shall, on the basis of disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of the Corrections Division.

To request an accommodation based on a disability, seek assistance from your housing deputy or request assistance from the deputy with submitting a service request form (KYTE) to the ADA Coordinator.

If you believe that you have been subject to discrimination on the basis of your disability you can submit a complaint as a grievance addressed to the ADA Coordinator.

SECURITY AND SAFETY ISSUES

SECURITY

Wristband Identification

You must wear your wristband at all times. Do not remove or tamper with it. If you are not wearing your wristband you may be subject to disciplinary action and you will be charged a replacement fee for a new one.

If your wristband breaks or is unreadable (print/picture) it is your responsibility to request a new one from your housing unit deputy. If you are not wearing it intact and properly secured to your wrist you can be denied, among other things, commissary, medications, recreation, library access and visits. **It must be properly secured to your wrist at release.** Your identity may have to be reconfirmed prior to release if you have tampered with your wristband; this may cause a delay in your release from custody.

Mandatory Lock-Down Times

The following times are set aside for routine mandatory restriction (no talking, lock-down status) on your bunk or in your cell:

- Beginning and ending of each shift;
- Immediately before and after meal periods;
- During formal inmate counts;
- Lights out / sleeping period;
- When directed by staff;
- During facility emergencies and drills;
- During housing unit activities like clothing exchange and commissary distribution.

Inmate Movement

You will be moved to various areas of the facility from time to time (i.e. court, visits, medical appointments, recreation, and law library). When you are moved you must:

- Be dressed in your full issue of clothes;
- Conduct yourself in a quiet and orderly manner and follow directions of staff;
- Not communicate with other persons or staff (medical, counseling, program, etc.) in any way during movement unless authorized by the escort deputy and you have a verifiable emergency.

Failure to comply with these guidelines may be grounds for denial of movement to any scheduled activity and may result in disciplinary action.

You are allowed to take only necessary legal material when moved for court, attorney visits and the law library. You may also carry necessary, authorized medications (i.e. nitroglycerin tablets). Medications must be in a medical envelope, authorized container or blister pack with your name, ID number, the name of the medication, and other necessary information. Each time you are moved outside your assigned housing unit you will be subjected to a search of your person and your property.

Transports

You will receive no prior notification of transportation arrangements. Do not ask the deputies, counselors, or medical personnel when you are scheduled for transport. Restraints are applied to inmates who are being transported. You are to follow the instructions of the transporting deputy. You are limited to taking only legal paperwork, personal letters, and medication authorized as keep on person (KOP). You cannot take books (to include faith based materials), magazines, commissary, or hygiene items with you when you are transported to other County or State jurisdictions.

Searches

Your cell, bunk area, property, and / or person are subject to random searches for contraband at any time. Trained dogs may be used to search bunks, cells and other areas of the facility for contraband. You may be subject to urinalysis, DNA sampling and/or blood alcohol testing. You may be subject to an unclothed search under the following conditions:

- Upon transfer to a housing unit from reception;
- Upon transfer to or leaving administrative segregation or disciplinary housing;
- After a contact visit;
- As part of a housing unit search;
- Leaving for, while involved in and or returning from an inmate work crew, inmate worker assignment or other activities that provide opportunity to introduce or transport contraband;
- When there is reasonable belief that you are in possession of contraband.

SAFETY

Emergency Procedures

In the event of an emergency, the facility will go into an immediate lock-down mode. You will be ordered by a deputy and/or loudspeaker to 'cell-in / bunk-in'. You are to immediately stop what you are doing and go to your cell or bunk and wait for further instructions. Any delay to cell / bunk-in will result in disciplinary action.

Fire Safety

Follow the deputies' directions in case of fire in your housing area. **They are trained to respond to emergencies with your safety in mind.** In the event of smoke / fire evacuation:

- Stay low to the ground;
- Keep your nose and mouth covered, and breathe through a damp cloth or towel. This will help keep your lungs clear of harmful particles in the air;
- Feel doors. If they are hot, do not open them and find an alternate route.

Earthquake Procedures

In case of an earthquake, duck under a nearby table, bunk or other similar cover, and hold on to it. If cover is not available, sit or lie next to a wall and cover your head, face, and eyes with your arms. Stay away from glass walls and windows. There may be aftershocks so stay in place even after the initial shaking has stopped until a jail staff member orders you to do otherwise.

Evacuation Procedures and Drills

You are required to participate in fire and emergency evacuation drills as directed by staff. Drills are designed to better prepare you for an actual emergency. A deputy will direct you through the evacuation route.

Emergency Call Light

Cells within the jails are equipped with an emergency call light button located near the door or on the wall. Use this for emergency purposes only; when medical or a deputy is needed due to illness or injury or when directed. **Misuse or abuse of your emergency call light will result in disciplinary action.**

ADMISSION AND RELEASE

Bail Information

You will be released after bail has been posted if you have no other holds. In most cases only ten percent of your total bail is required. Bail is accepted 7 days a week 24 hours a day at the Multnomah County Detention Center (MCDC) second floor jail lobby desk. Bail is accepted in the form of cash or credit card of a person not in custody (no out of state funds accepted). Money deposited by cashier's check must be done during banking hours and accompanied by the business card of the issuing teller for phone verification. You may self-bail at any time. If you have enough money in your account to post bail, inform a deputy that you wish to 'self-bail,' and they will begin the process for you.

Grand Jury Arraignment Hearing

If you have a Grand Jury Hearing, an attorney will help you through it (you will be appointed an attorney if you cannot afford one). The judge will give you a court date. You do not attend court on that date; this is when the Grand Jury will determine whether to formally indict you on (any) charge(s).

Indictment Arraignment Hearing

If the Grand Jury decides to indict you, an indictment arraignment will be scheduled and the judge may rule on your release at that time. You will be formally indicted on charges (accused of crime by a judge) at this hearing. You will receive a copy of the indictment and be given another court date.

Court Appearances

If you are in jail for a new charge and have not seen a judge within 48 hours of your arrest, excluding weekends and holidays, contact your attorney. If you do not know who your attorney is, your counselor can obtain that information. When in court, if you do not understand the procedures, ask your attorney or the judge to explain them.

Sentenced Releases

Inmate releases happen at any time of the day or night. All inmates are released from the Multnomah County Detention Center (MCDC). If you believe you are being held in custody past your release date, you are to immediately contact your housing deputy and/or counselor.

On your release date your release will occur between the hours of 12:01 a.m. and midnight. You may not request a specific release time. You will be allowed to take your personal belongings from the housing unit, (excluding jail property, books, etc.). You are to return all county clothing, bedding, and linen. You may only take religious books if they do not have a 'Multnomah County' or 'Chaplain' label on them.

Your money, personal clothing and property will be returned to you during the release process. If you want weather appropriate clothing for release your housing unit deputy can provide a personal clothing exchange form for this. Submit it at least two weeks prior to your release date (see Personal Clothing Exchange page 31).

Pre-Trial Release Services (PRS)

During your initial arraignment you may have been referred by the judge to PRS for possible pre-trial release consideration. This does not mean that you will be automatically released to PRS. Within a few days of receiving the referral a representative of either the Pre-trial Services program or Close Street Supervision will contact you for an interview. This interview may occur in person or by phone. You will need to provide the deputy or case manager with the following information;

- Where you will reside if you are released. Your housing must be verifiable.
- Family members that can be contacted as references or other members of the community who are willing to provide you with support.
- Your marital status and the status of child custody if you have children.
- Your employment history and valid contact information to verify your employment.
- Your history of alcohol and substance abuse.
- Any mental health condition that you have been diagnosed with.
- Any treatment that you have received in the community and the contact information for your treatment providers.
- You may be asked to sign a release of information for the deputy or case manager to speak with your treatment providers.

Do not discuss your criminal case with the deputy or case manager during the interview process. Once the interview is complete it will take approximately two weeks before a release decision is made. In that time if you have questions you should contact your attorney. Corrections staff do not have access to information about an ongoing pre-trial release investigation so they cannot assist you. Inmates with PV, INS, USM, Fugitive, County, or other holds do not qualify for pre-trial release unless the hold is lifted.

If you are released by a judge and ordered to report to PRS, you must do so within 48 hours excluding weekends and holidays. Both close street supervision and pre-trial release services are located in the Justice Center. If you are not sure which program to report to, check with the facility security staff at the main entry and they will direct you. Failure to report to PRS as ordered will result in a warrant for your arrest.

Probation

If you are in custody because of a probation violation detainer or warrant, your P.O. may contact you to impose a sanction or you may be required to appear before a judge to address

the violation. Phone calls are restricted from the jail to your P.O. so you will need to send a service request form (KYTE) to make contact.

Parole and Post-Prison Supervision

If you are in custody because of parole or post-prison violations your P.O. may impose an administrative sanction, or your violation may be addressed by a hearings officer. You may initially be held in custody by a detainer **but this can be replaced by the board or the local supervising authority with a warrant.**

Parole and Post-Prison Supervision Sanctions

There are 3 ways a sanction can be imposed for a parole/post-prison supervision violation:

1. Administrative Sanction: A parole & probation officer may impose an administrative sanction by phone, or prior to booking upon your waiver of a hearing.
2. Morrissey Hearings Sanction: A morrissey hearings officer will interview you, and may impose (a) sanction(s) or revocation sanction upon your waiver of a hearing or after a hearing.
3. The Sanctioning Authority (Parole Board or Local Supervisory Authority): The sanctioning authority may upon waiver of, or after a hearing, order administrative sanctions or a revocation sanction. They may override sanction(s) ordered by the supervising officer or hearings officer. The parole board may deny re-release for offenders on parole and defer the re-release decision pending a future disposition hearing.

If you are in custody because of an interstate compact detainer your P.O. may contact you to impose a sanction or a violation report will be submitted to the sending state. If a violation report is submitted, no action will be taken to address the violation until a response to the violation report is received from the sending state.

If you have not been contacted or sanctioned within 15 days of coming to jail send a service request form (KYTE) to your P.O. with this information. You may also KYTE the parole and probation hearings officer if you have not heard from them or been sanctioned within 20 days of coming to jail.

INMATE MANAGEMENT

CLASSIFICATION

How Classification Works

The MCSO Classification Unit determines where you will be housed while you are in custody in Multnomah County. Classification deputies consider a number of factors when classifying inmates, such as past and current institutional behavior and criminal charges. Your housing placement will be primarily based on the needs of the Sheriff's Office and a legal mandate to maintain the safe and orderly operation of the jails. As part of the classification process individual needs for services and programs will be considered.

Staff members may document your behavior and / or other information relevant to housing needs and send it to the classification unit. This information may trigger a re-evaluation that could affect your classification status, housing location, access to inmate worker positions, inmate programs, program referrals and / or early release options.

Classification status cannot be grieved. If you have a personal safety concern in your current housing unit:

- Notify a deputy immediately;
- Be prepared to provide specific information about whom or what poses a threat to you.

Classification will decide if a housing change is appropriate.

Housing Classifications

There are a variety of housing options in Multnomah County jails. Some have more restrictions than others. If you want to move to less restrictive housing you may request a status review once every 30 days by submitting a service request form (KYTE) to the Classification Unit. You must outline the reason for your request.

DISCIPLINARY RULES AND PROCESS

If you do not meet the jail expectations while in custody (at any location, including any of the jail facilities, court holding facility, transport or programs), you are subject to both discipline and prosecution under criminal law. Violations can result in you being housed in a more restricted environment.

Minor Rule Violations / Inmate Citations

A staff member may issue you an inmate citation if you violate a minor rule of conduct. You can choose to sign the citation and accept the imposed sanction, or choose **NOT** to sign it and have a formal hearing conducted by the hearings officer. Your hearing will take place within 96 hours of the discovery of the alleged violation(s), excluding weekends, holidays and inmate availability. You will not be charged with an additional or more severe violation for refusing to sign a citation and requesting a hearing.

Minor Rules of Conduct

1. Abuse of Commissary or Laundry Rules: Failing to follow commissary/laundry rules.
2. Excessive Books, Commissary or Other Personal Items: Possessing these items in excess of posted or written limits.
3. Food / Drink in Unauthorized Area: Taking food or drink to unauthorized areas or trading / giving away food items. (Only commissary items are authorized in bunk areas or cells. Perishable commissary items must be completely eaten shortly after opening the product container).
4. Horseplay: Instigating or participating in roughhousing, sparring, or horseplay.
5. Improper Use / Wearing of Issued Clothing or Wristband: Failing to properly wear issued clothing. ‘Sagging’, pegging pant legs in socks, rolling up sleeves or pant legs, wrapping the head with any material, not tucking in T-Shirts or partial dress are examples of violations of this rule. **Wear your wristband at all times and do not tamper with it or alter it.**

6. Placing / Sticking Objects on Unauthorized Surfaces: Placing or affixing objects onto walls, window, lights, bunks, beds, ceilings, floors, vents or doors.
7. Sitting on Tables: This includes sitting on anything other than benches or chairs designed for sitting, or the ground.
8. Unauthorized use of a 'call light': Call lights are for emergency use only or when staff directs their use.
9. Unauthorized Communication: Communicating with other inmates during bunk-in or lock-down times, through locked doors during walk times, between dorms or other housing units by means other than the U.S. Postal Service.
10. Unauthorized Possession of Property: Receipt, or use of another's property without authorization. This includes accepted or traded food.
11. Violation of Posted Rules: Violating any posted housing rule.
12. Violation of Safety and Sanitation Rules and Standards: You must properly maintain your living or work area and person according to housekeeping, sanitation, and hygiene rules, practices and standards, including making your bed (see Sanitation page 34).

Minor Rule Violation Sanctions

Deputy imposed sanction(s) when you accept a citation(s) can result in and include:

1. Loss of one or more privileges for up to eight (8) hours;
2. Assignment of extra work for sentenced inmates, or un-sentenced inmates if voluntary;
3. Restriction to cell or bunk for up to eight (8) hours;
4. A written reprimand;
5. A verbal warning, counseling, or oral reprimand.

If the inmate requested a formal hearing the imposed sanction(s) for (a) 'guilty' finding(s) can result in and include:

1. A loss of one or more privileges, including work release (if available) for up to 14 days;
2. Disciplinary status for up to 5 days;
3. Extra work assignments for up to 40 hours for sentenced inmates. Un-sentenced inmates may accept in writing, extra work instead of lockdown time;
4. A change in work assignments, classification or housing unit;
5. A loss of personal visits for up to one week;
6. A suspended sanction or a verbal warning.

Major Rule Violations

If you are charged with a major rule violation you may be moved to the disciplinary housing unit on pre-hearing segregation/lockdown status before your disciplinary hearing. **Your personal property will be taken from you and secured (it is returned when you leave the unit).** You may keep in your possession legal papers, books (4), medications, and essential hygiene items.

The sergeant on duty assigns you an initial disciplinary level (0 to 5), which is reviewed on the 7th day of your lockdown and every seven days thereafter. Your disciplinary level determines the extent of your privileges.

Major Rules of Conduct

1. Abuse of Medical Process: Misusing, or attempting to misuse authorized medication, or the medical process.
2. Assaulting, Fighting, and/or Threatening a Person / Staff: You must not fight, physically attack, or cause physical injury to anyone. This includes grabbing, hitting, or pushing another person.
3. Bribery: Bribing any official, staff member or inmate or attempting to do so.
4. Disrespect or Harassment: Showing disrespect or harassing persons/staff in writing, or by use of inflammatory language, gestures, or because of race, sex, religion, national origin, disability or political beliefs.
5. Disruptive Behavior: Disorderly, noisy, gang-related, annoying, harassing, or violent conduct. Disruptive behavior interferes with the safe, secure, and orderly operations of the facility.
6. Entering an Unauthorized Area: Entering into, or being in a restricted area without authorization. You must stay out of areas that staff have not given you permission to be in. You are not allowed to:
 - Enter or loiter by another person's cell or bunk area, or sit on a bunk that you are not assigned to;
 - Reach into the deputy's station unless directed by a deputy to complete a specific task or work assignment;
 - Enter any areas outside your assigned housing unless instructed to by a deputy.
7. Escape, Attempted Escape, Unauthorized Departure: Escaping, planning to escape or attempting to escape from custody, or an unauthorized departure from any program or facility of the Sheriff's Office.
8. Extortion, Blackmail: Extorting, strong-arming, blackmailing, demanding, or receiving money or anything of value (meals, commissary and the like) as protection payment against the threat of violence to others or their property, or attempting to do so.
9. Failure to do as Ordered (FTDAO): Failing to respond promptly to staff orders, including, but not limited to, failing to comply with required evidence collection (DNA and/or U.A.), medical testing (TB), or other medical directives. (DNA testing is done to comply with State Law, or a court order. There is a non-negotiable administrative fee for it).
10. Failure to Perform Work Properly: Conduct that interferes with the efficiency of work or a work crew; failure to complete assigned task, or work in a timely, safe and/or efficient manner.
11. Forgery: Forging, altering, possessing, or producing fraudulent documents.
12. Gambling: Gambling or possession of gambling devices.
13. Indecent Exposure, Sexual Activities, Sexual Harassment: Intentional exposure of genitalia, participation in any sexual activities, sexual proposals to, or harassment of other persons.
14. Lending / Receiving for Gain: Lending or receiving money, commissary, or anything of value for gain.
15. Lying: Lying or providing false information.
16. Misuse of Mail Processes: Falsely labeling mail or abusing the mail process, and/or mailing contraband, property, possessions, or medication. Sending threatening or court prohibited mail (see Inmate Communication page 18).

17. Misuse of Identification Wristband: Failure to wear your wristband at all times. Altering, tampering with, trading, or destroying the identification on the wristband. Possession of someone else's, or more than one identification wristband.
18. Misuse or Abuse of Equipment or Property: Unauthorized possession, use, or unsafe use of, or that causes damage to or alters the function of any safety and security device (lighting, locks, windows, mirrors, fire detection equipment alarms or fire extinguishers equipment, cameras, vents etc.) or other equipment. Destroying, altering, tampering with, or unauthorized possession of county or other inmate's property; vandalism by writing on or etching jail property or graffiti found in your living area or caused by you. Altering or misusing jail issued items (clothing, bedding, microwave ovens, razors, hair clippers etc.).
19. Possessing Contraband: Possessing or consuming anything not issued or authorized for use by staff or the rules and regulations of the facility; altering the use or design of any item from its intended purpose, or attempting to do so.
20. Possession of Money: Possessing money or currency in a secure detention facility.
21. Refusal to Work: Refusing to work if you are sentenced on any charge to county time.
22. Rioting or Inducing Riot: Rioting or inducing others to riot, or attempting to do so.
23. Smoking in a Jail Facility or County Vehicle: (also a violation of State Law) Smoke odor on your body is sufficient cause for discipline.
24. Tattooing / Piercing: Tattooing, marking, piercing, or disfiguring yourself or another, or possession of tattoo devices.
25. Theft: Stealing or taking anything that is not yours, including but not limited to meal items or medication, or attempting to do so.
26. Threats: Making direct threats to cause physical harm to another person, verbal or written, explicit or implied.
27. Three Minor Rule Violations in Thirty Days: You may not accumulate 3 or more informal discipline actions in a 30-day period. You are subject to formal discipline for your repeated disregard for jail rules.
28. Unauthorized Contact with Other Inmates, Staff, or the Public: Misuse of the telephone I.D. P.I.N. system (see Guidelines for Phone Usage page 24). Unauthorized written, verbal, telephonic or gestured contact with other inmates, staff or the public. **This includes violating a court order, including court-ordered restrictions on victim contact.**
29. Unauthorized Gathering / Demonstration: Engaging in, or encouraging an unauthorized gathering, meeting or group demonstration.
30. Violation of the Criminal Statutes: Violation of any Federal, State or local criminal statute or ordinance.
31. Violation of Library / Law Library Rule / Regulations: Destroying of library materials, possessing more than four (4) books/magazines per person (other than legal/religious/AA or NA/ GED books), or abusing law library privileges by using the resources for purposes other than legal study or case preparation.
32. Violation of Program Rules: Violating any facility program rules, or failure to comply with a program contract.

Formal Disciplinary Hearings

If you are charged with a major rule violation, you have the right to a disciplinary hearing. The disciplinary hearing will be recorded. The hearing process meets all requirements of due process for inmate discipline.

The following is a list of disciplinary hearing guidelines:

1. Your hearing will take place within 96 hours of the discovery of the alleged violation, excluding weekends, holidays, or subject to your availability;
2. You are responsible to conduct yourself in a respectful manner at all times, including during a disciplinary hearing;
3. You have the right to be present during the disciplinary hearing;
4. You must represent yourself. An attorney or another inmate may not represent you;
5. You may request that a staff member help you with translation, reading, or by explaining the hearing process;
6. You will be given an opportunity to make a statement and present information as evidence;
7. You may request that the hearings officer interview specific witnesses. The hearings officer may limit the number of witnesses interviewed and:
 - You must identify the witnesses in writing, by name, at the time of the disciplinary hearing;
 - You may be required to supply written questions for witnesses;
 - You may be excluded from the testimony of witnesses whose testimony must be given in confidence;
 - In the event that a witness is not available, the hearings officer may proceed with the hearing.

Self-Incrimination

The hearings officer will warn you that your testimony during a hearing may be used against you in a criminal prosecution. At the time of your hearing you will be advised that refusal to answer questions may be considered as evidence of guilt, but other evidence is needed to support a guilty finding as your silence cannot sustain a violation.

Major Rule Violation Sanctions

As a result of a 'guilty' finding by the hearings officer on a major rule violation, the hearings officer may impose any one or a combination of the following sanctions:

1. Change in facility assignment, housing unit or removal from program;
2. Disciplinary segregation for up to 30 days for one violation, 60 days for multiple violations (per disciplinary incident);
3. Monetary fines up to \$100.00 per disciplinary incident;
4. Loss of commissary privileges;
5. Loss of good time credit (sentenced inmates only);
6. Loss of dayroom privileges (on bunk or in cell restriction);
7. Loss of inmate worker status for up to the remainder of the current incarceration period;
8. Loss of telephone for personal business;
9. Restitution for full replacement or repair/replacement costs of any items damaged or destroyed, and/or restitution for staff response costs;

10. Restriction of privileges for 30 days for one violation, 60 days for multiple violations:

- Personal mail;
- Visits;
- Recreation;
- Personal phone use;

11. Written reprimand or verbal warning;

12. Restitution for medical care of any person injured in a physical altercation. Funds in inmate trust accounts may be used for restitution;

13. Removal from law library sessions.

Suspended sanctions may be enforced in a future disciplinary hearing if further violations occur during your current custody.

If you are found guilty of misconduct, reports of the incident may be sent to appropriate officials, judges, district attorneys, penitentiary officials (State and Federal) and parole and probation officers.

Post-Hearing Right of Appeal

If you choose to appeal a 'guilty' finding you must submit a service request form (KYTE) to the facility commander within 7 days of a hearing. **You must outline substantial new evidence** that was unavailable for the hearing and could have affected the outcome.

Sanction Reduction

One request per sanction is allowed. You may apply for a reduction of an imposed disciplinary sanction by submitting a service request form (KYTE) to the facility commander, if the following conditions have been met:

- 10 days have passed since the disciplinary hearing, or, the reviewing sergeant agrees to waive the 10 days;
- You are assigned to discipline level 1 when you submit your request.

The facility commander may consider status of restitution owed.

Levels of Disciplinary Housing

Inmates who violate facility rules of conduct are assigned to one of 5 levels. Your privileges are restricted based on which disciplinary level you have been assigned to and your lockdown time may be served in a disciplinary housing unit. Inmates assigned to levels 3 through 5 wear white jumpsuits to signify their disciplinary status. When your lockdown time is completed the classification unit will assign you to appropriate housing.

Levels of Disciplinary Housing

ITEM	LEVEL 1
Book/Magazine	Total books not to exceed 4
Commissary	Hygiene items and writing items only
Visitation	Social visits, authorized by a sergeant or lieutenant, based on your behavior
Walk Time	60 minutes of walk time per 24 hour period
Attire	Jail Standard

ITEM	LEVEL 2
Book/Magazine	Total books not to exceed 4
Commissary	Hygiene items and writing items only
Visitation	Social visits, authorized by a sergeant or lieutenant, based on your behavior
Walk Time	30 minutes of walk time per 24 hour period
Attire	Jail Standard

ITEM	LEVEL 3
Book/Magazine	Total books not to exceed 4
Commissary	Hygiene items and writing items only
Visitation	Social visits, authorized by a sergeant or lieutenant, based on your behavior
Walk Time	15 minutes of walk time per 24 hour period
Attire	White jumpsuit

ITEM	LEVEL 4
Book/Magazine	Total books not to exceed 4
Commissary	Hygiene items and writing materials issued by staff as needed
Visitation	Emergency social visits only, if authorized by the facility commander or their designee
Walk Time	One 15 minute walk per 24 hour period, Monday through Friday
Attire	White jumpsuit

ITEM	LEVEL 5
Book/Magazine	Total of all books not to exceed 4
Commissary	Hygiene items as needed and limit of 3 sheets of paper and 1 pen issued by and returned on 'C' shift to staff
Visitation	Visitors limited to clergy, legal counsel, and emergencies as determined by the officer in charge of the shift
Walk Time	One 15 minute walk per 24 hour period, Monday through Friday and may be in belly chains and leg irons
Attire	White jumpsuit

Enhanced Level 5 Behavioral Options

In addition to the above mentioned level 5 limitations, the facility commander or designee may impose the following disciplinary measures based on your behavior:

1. You may be fed Nutra-Loaf for up to 7 days for the abuse of food, body fluid or feces.
2. You may be restrained in leg irons and belly chains during each walk period.
3. A paper suit may be issued to you in place of the white jumpsuit.

CRIMES IN JAIL

Criminal Prosecution on Rule Violations

Any conduct that constitutes a crime may result in criminal prosecution and disciplinary action. The case will be referred to the appropriate law enforcement officials and courts for prosecution. ORS 163.208 'Assaulting a public safety officer' (i.e. corrections staff) will result in criminal prosecution. According to ORS 162.185 introduction of contraband to a correctional facility is a class "C" felony, punishable by up to 5 years in prison. Bringing contraband (e.g. weapons, drugs, electronic devices) into the facilities will result in criminal prosecution.

Inmates are to report assaults, attempted assaults, and / or harassment, threats or intimidations to any jail staff. Immediate action will be taken to prevent further violations and to provide physical and mental health care. MCSO will make a reasonable effort to maintain your confidentiality. Reports of such conduct will also be investigated for disciplinary action or prosecution.

GRIEVANCES

Purpose of a Grievance

You may file a grievance about a jail policy, practice, rule, or condition that directly affects you if you think it is illegal or poses a hazard. You must first attempt to resolve a grievance informally with the employee it concerns. If this is unsuccessful you may obtain a grievance form from your housing unit deputy during walk time. The appropriate staff will review the grievance once it is received.

Emergency Grievances

You should immediately file an emergency grievance if you think you are not the person who should be in custody or a mistake of your identity has been made in a warrant. Or if you have a complaint that threatens a person's life, health or safety and is time sensitive that may cause undue harm or hardship.

Grievance Process

You must be specific and factual in your comments on the grievance form. You must include dates, times and names of staff or inmates involved or present if known, or description if names are unknown. You must include the location where the issue took place and a description of what happened in as much detail as you can remember.

Your grievance about an issue will not be considered fully exhausted unless you have properly and timely filed an appeal at every available grievance level. If you are transferred to another facility, you may still exhaust your grievance through the mail. Your grievance should be mailed to the Multnomah County Inverness Jail (MCIJ). In the event you are transferred you will have an additional seven days to file any grievance appeal.

Grounds for a Grievance

You must follow the grievance guidelines:

- A personal dispute between you and an employee is not grounds for a grievance;
- Group grievances, or grievances submitted on behalf of another inmate are not accepted;
- Grievances must be submitted to a staff member within 5 days of the incident or situation upon which the grievance is based. Timeliness issues are not waived because of incorrectly filed grievances;
- A grievance must address only one subject, circumstance or event;
- You will receive a copy of your grievance once a staff member dates and signs it;
- Any staff member receiving a grievance must attempt to resolve the problem and provide a written response within 5 working days of receipt. If the staff member cannot resolve the problem, they will contact their supervisor;
- You cannot grieve the disciplinary process or sanctions, they may only be appealed (see Post-Hearing Right of Appeal page 15);
- You cannot grieve classification decisions (see Classification page 9);
- You may only file one grievance and one appeal per event.

If you are not satisfied with the resolution of your grievance you may submit it to the next supervisory level by submitting a new grievance form within 5 days of receiving the response. The new grievance form must include the original grievance date, the name of the staff member you submitted it to, the name of the staff member who resolved the grievance, and the DB# (located in the upper right hand corner of the original grievance).

There is no time limit imposed on when an inmate may submit a grievance regarding an allegation of sexual abuse. An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint.

INMATE COMMUNICATION

MAIL

Mail is an important way to assist you in maintaining family and community ties. Your mail, both incoming and outgoing, will be regulated to ensure that the use of the mail process is not abused or used in violation of mail rules and laws.

Both incoming and outgoing mail can be opened and inspected for contraband. It may be read, photocopied, and made available to Sheriff's Office staff, parole and probation supervisors, the district attorney's office, law enforcement agencies and/or your sentencing judge.

You are eligible to order two pre-stamped envelopes per week through commissary even if you have no funds. For indigent (those with no money on account) inmates who order envelopes, the mail week starts Sunday and ends Saturday. Any money you receive while in custody will be applied towards money you owe from indigent commissary orders. **Violation of these rules / guidelines may result in disciplinary action and or criminal prosecution.**

Outgoing Mail

Standards for all outgoing mail:

- Maximum weight for each letter is 1 ounce. 1 envelope and 8 sheets of commissary issued tablet writing paper equal 1 ounce. Letters weighing more than 1 ounce will be returned;
- Your name, housing location, ID number (on your wristband), and the MCIJ facility return address (11540 NE Inverness Drive, Portland OR 97220), must be on each piece of mail in the generally accepted return address location on the top left of the envelope. Using false information, misidentifying mail as official or legal, attempting to mail contraband, or misuse of the mail system will result in disciplinary action and possible criminal prosecution;
- 'Official mail' is any mail sent to your attorney, a judicial body, public official, parole or probation officers, administrator, or jail administrator. It needs to be identified by writing 'official mail' or 'legal mail' on the envelope. Overweight 'official / legal mail' costs will be deducted from your account. There is no limit to the number of official letters you may send, with or without funds;
- You may not send out mailers from magazines or newspapers;
- Manila envelopes can be purchased from commissary. When mailed they will be weighed and stamped, with postage deducted from your account. **If you have insufficient funds, non-official mail is returned to you;**
- International mail is forwarded to inmate accounts for processing;
- Your outgoing mail may be read, inspected, and copied;
- Do not send out mail for other inmates using your information on the outside of the mail;
- Do not send out mail that has separate post-able mail in it (you must purchase pre stamped envelopes from commissary) ;
- Abide by court orders regarding contacting victims and witnesses.

Incoming Mail

Standards for incoming mail:

- All incoming mail must be addressed in the following manner and to the following address (regardless if you are housed at MCIJ or MCDC).

First Name Last Name SWIS #
11540 NE Inverness Dr.
Portland, OR 97220

- Mail must be addressed to the name you are booked under, even if it's not your true name.
- Address information may include; Mr. Mrs. Ms. M. Dr. Rev.

**NO OTHER DRAWING OR WRITING ON THE ENVELOPE IS ACCEPTABLE.
IMPROPERLY ADDRESSED MAIL WILL BE RETURNED TO THE SENDER.**

- Official mail or legal mail, clearly marked by the sending entity, are opened and inspected in your presence only. The return address on legal mail must have the sender's agency or firm title and address.
- Mail sent to you from another Multnomah County correctional facility or any other housing area must be sent through the U.S. Postal system;
- The only acceptable funds sent by mail are payroll or government issued checks and are subject to verification before they are credited to your account. A receipt showing monies received will usually be delivered to you within a day or two. Mail containing funds for an inmate other than the mail recipient will be returned to the sender.

Contraband Mail

It is a felony to introduce contraband into a correctional facility (through the mail or otherwise). The enforcement division of the Sheriff's Office investigates such activity or suspected activity for prosecution. Mail that contains unacceptable enclosures is returned to the sender.

You will receive notice of any mail received and returned to sender. The following is a listing of unacceptable items:

- Any device capable of storing electronic media (videotapes, cassettes, CD ROMS, computer disks, flash drives and cell phones);
- Any foreign substance including but not limited to food, stickers, perfume, "post it", glue, crayons, glitter, tape, lipstick, plastic labels, wood, stone, ribbons, leather, metal on/in the envelope or contents;
- New or used books and magazines other than acceptable publications directly from the publisher, distributor, wholesaler or retailer (2 pound maximum-four book limit per delivery);
- No stamped or blank envelopes; unless self-addressed official mail;
- Inflammatory material if it constitutes a threat to the security and safety of the facility (as defined by MCSO operational procedures);
- Written or visual material encouraging or containing portrayals of sexual activity or **nudity (this includes partially nude/nude child and baby pictures)**;
- Personal checks, stamps, pens, bus passes, stickers, or calling (phone) cards, stamped envelopes, padded envelopes, bubble envelopes;
- Pictures, photos and greeting cards larger than 8 ½ X 11;
- Weapons, explosives, and/or any materials used in making weapons, explosives or other unlawful substances;
- Escape plans;
- Drugs or drug paraphernalia;
- Flammable materials;

- Polaroid photos or any photo with stiff backing;
- Pages/clippings or any other materials of any publication;
- Communication that is 'restrained' by the court;
- Deceptively addressed items.
- Blank cards and paper
- Items of clothing

Mail Appeals

If you believe the item was improperly denied, you may appeal the decision by sending a written letter stating the reasons you believe the decision was wrong within 15 days from the date you received 'Notice of Returned / Confiscated Inmate Mail' to, Attn: Mail Appeal, Multnomah County Inverness Jail, 11540 NE Inverness Dr., Portland, OR 97214. Your appeal must identify specifically why you believe our decision to deny the correspondence was wrong and include your name and return address. You will be sent our decision on your appeal within 15 days of receipt.

VISITING

Visiting Guidelines

Social visits are between an inmate and family, friends, or business associates, and occur during visiting hours. Do not expect privacy for visits except during official and attorney visits. You and your visitor(s) will be required to follow these visiting procedures:

- All social visits are monitored so do not expect privacy during your social visits;
- A maximum of 3 visitors including babies / children, are allowed per visit;
- Your visit will be terminated if your visitor leaves minors unattended in the public lobby or parking lot;
- Your visit will be terminated if your visitor leaves the visiting area for any reason;
- Visits involving disruptive babies / children will be terminated;
- Visitors who are disruptive will be removed and may be denied future visitation privileges and / or excluded from the facility;
- Visitors may be denied access for failing to abide by the posted dress code or visitation rules;
- Classification change to disciplinary status may result in inmate visiting restrictions.

All Visitors:

- Must present valid picture identification (state driver's license, state or military I.D. card, passport, government issued I.D., current school I.D. for ages 14-17, copy of birth certificate for minors 13 and under);
- Will be searched using a metal detector, other scanning device or by a physical pat-down search;
- Are subject to a records check (including warrants). The resulting information may be cause for denial of visitation, arrest, I.D. confiscation or all of the above;
- Can be denied a visit for failure to follow procedures or meet safety and security criteria. Denial of a visit may be appealed to the O.I.C. (officer in charge) or the facility commander.

Visiting Schedules

Visiting schedules are posted in housing areas, are regulated by the needs of the facilities, and are subject to change.

Social visiting for inmates at MCDC is on Saturday and Sunday between the hours of 9:00 a.m. and 9:00 p.m. with a break between 2:15 and 4:00 p.m. All visits are on a first-come, first-served basis. Visitors are encouraged to arrive earlier than the specified visitation time to sign-up.

Social visiting for inmates at the Multnomah County Inverness Jail (MCIJ) is on Saturday only, between the hours of 9:00 a.m. and 2:00 p.m. with a break between 11:00 a.m. and 11:45 a.m. All visits are on a first-come, first-served basis. Visitors are encouraged to arrive at least (1) hour prior to their preferred visit time.

Video Visitation

Friends and family may conduct video visits from either Multnomah County Jail lobby, or from the comfort of their own home. Inmates are allowed two (2) 20-minute onsite video visits per week using the kiosks located in the jail lobby free of charge. Video visits from home require a pre-paid account through our video visiting service provider and are subject to approval by visitation staff. Those visits are 30 minutes each, and can be scheduled 7 days a week. To visit from home, all that is needed is a computer/laptop, tablet or smart phone with a high speed internet connection, and a webcam.

Visits can be scheduled using the jail lobby scheduling kiosk or via the internet at www.visitfromhome.net. All social video visits must be scheduled at least 24 hours in advance and are recorded. Video visitation is offered Monday through Sunday 9:00 a.m. to 10:30 a.m., 1:00 p.m. to 2:30 p.m., 4:00 p.m. to 5:30 p.m., and 7:00 p.m. to 10:00 p.m. (Hours are subject to change depending on facility operational needs).

Video visits may be cancelled if you are scheduled for any type of movement or appointment. Any cancelled visits are the responsibility of the visitor to re-schedule.

Any questions regarding video visitation should be directed toward your housing deputy. Video visitation may not be available based upon your classification.

Visiting Minors

Visitors under the age of 18 must be accompanied by a parent or legal guardian or by presenting notarized approval from a parent or legal guardian. Parent or legal guardian status must be established by presentation of birth certificate, adoption papers, court order or notarized document at the first visit.

Minors (17 years of age or younger) who are emancipated or married to the inmate they are visiting may do so un-chaperoned but they must have the approval of the officer in charge of the shift. A valid marriage license to the inmate they are visiting and / or emancipation papers are required. Visiting minors 15 years of age and up must present current, active, government issued photo identification to visit (student body card, Oregon I.D. card, etc.).

Official / Contact Visits

Official visitors must provide acceptable identification documents such as an agency identification card, or a bar card (if an attorney). The number of contact visits an inmate receives, and the length of contact visits, is limited by the facility schedules, space, and personnel constraints. Official visitors may visit from 9:00 a.m. to 3:00 p.m. and 4:00 p.m. to 10:00 p.m. every day.

Visiting Form

A completed and submitted visiting form (available in your housing unit), provides access to social visits. Fill it out using the name and ID number that is on your wristband. Make sure the names, relationship, age, and phone number of **all** the people you approve for visits are on the form. If a visitor's name (child / infant included) is not on your completed form, the visit will be denied. If the age and phone number is unknown, write 'unknown'. Visiting forms are returned if they are inaccurate, illegible or incomplete. Sign and date the form acknowledging the declaration that there are no restraining orders, court judgments, court decrees or other court orders existing in any State or Federal court that would prohibit, restrict or limit contact of the visitor with the inmate. One visiting form is kept on file per inmate.

If you change facilities, or wish to add / delete a name, submit a **new visiting form listing every person** you authorize to see you. Old forms are discarded and replaced with the most recent one.

TELEPHONE USE

You will not be able to make out-going calls until you set up your inmate telephone account P.I.N. (Personal identification number). Your P.I.N is a combination of the first 6 digits of the ID number found on your wristband and the month and day of your birth based on your current booking. Example: Your ID number is 123456. Your birthday is 12/03/1972 (12/03). Your P.I.N. would be 1234561203. If your ID is 5 numbers or less (ID number 1234) add '0's to the front of your ID until it is 6 digits long (001234). Added to your birth date your P.I.N. becomes 0012341203.

The telephone system will instruct you through each call so when you make your first call have your P.I.N. handy and follow the instructions on the phone:

Step One: Inmate picks up handset. The system asks the inmate to select which language to use (1 for English, 2 for Spanish). Enter your six digit ID number. The inmate inputs the area code and phone number they want to call. If this is the first time making a call it will prompt for name. A recording will tell them that the call will be recorded and that custom calling features will not be allowed and prompted to press 1 to accept the stipulations.

Step Two: The computer then validates the call to verify the number (to see if the number is blocked, or number disconnected, etc.). **Calls can also be rejected and blocked by the called party.**

Step Three: After the number is verified the call is connected. Once the called party answers the voice prompts tell them that the call is from a jail and identifies the inmate placing the call, along with the cost of the call and that the call is being recorded. If they accept, the collect call it is connected.

FCC: First Call Connect – gives the called party a chance to set up billing for landline and cell phones. The inmate will be asked a second time to say their name. When the called party answers, a recording comes on to let them know that if they want to receive calls from the inmate, they need to set up billing by dialing 1-800-844-6591. This is a feature for the numbers that have not already established a billing account.

The telephone system has pre-programmed usage guidelines, limiting the total minutes, and call attempts. The system will automatically block any calls in excess of: 400 minutes or 70 call attempts per week to any one local number, or 240 minutes or 50 call attempts per week to any one long distance number. Calls are programmed to last no more than fifteen (15) minutes. All calls are 'collect'. The fee is stated at the beginning of each call.

A warning will be announced to both parties before reaching their telephone limits. The person who pays the phone bill can call Secures billing at 1-800-844-6591 to set up billing arrangements. Secures billing is also accessible by going to the website www.securustech.net.

Reasons a call may be blocked

1. Request of called party;
2. Cell phones don't work until they have been set up through Securus billing;
3. Blocked because of non-payment of funds to local phone company or Securus billing;
4. Exceeding daily, weekly, or monthly credit limits;
5. If the receiving caller attempts a 3-way call, the telephone number becomes automatically blocked;
6. Court ordered;
7. Request from police, staff, or victims.

If the person you are calling is blocked for any reason they must call their local phone company and Securus billing 1-800-844-6591. Or they can go to the website at www.securustech.net. They might be able to get the blocked number removed. Deputies will not be able to get your phone number unblocked. When you receive a message that the number you are calling is blocked, or any other phone complaints, you can send a service request form (KYTE) to the classification sergeant.

Note: because of privacy acts, we cannot tell you why the number is blocked.

Please include:

1. Your name and wristband ID #;
2. The facility you are calling from;
3. The date and time the call was attempted;
4. The number of telephone that has the block placed on it.

A list of public defenders, official agencies and certain private attorneys are posted in each housing area. Calls made to any of these numbers are free of charge. In each housing unit there is a telephone dedicated to incoming legal or official calls.

Personal phone calls may be monitored and / or recorded by law enforcement officials for any reason that is consistent with the purpose and legitimate interest of the jail. Do not expect privacy in regards to your personal telephone calls. Attorney calls are not monitored or recorded.

Guidelines for Phone Usage

Failure to follow these guidelines / rules may result in the restriction of phone privileges, disciplinary action and/ or criminal prosecution:

1. Make attorney / legal calls during walk times;
2. Do not make or attempt any three way or third party calls ("call waiting" is interpreted by the phone system as attempting to make a 3 way call);
3. Do not use the telephone to harass or threaten another person. This can result in the loss of telephone privileges, disciplinary action and/or additional criminal charges;
4. Do not talk above normal conversational tone while using the telephone;
5. Do not use another inmate's P.I.N. to make a telephone call, regardless if you have their permission;
6. Do not initiate a phone call for another inmate. Never hand off a phone call that you have made to another inmate and do not take the phone on a call that another inmate has initiated;
7. Abide by court orders regarding no contact victims and witnesses.

TTY Machine

A TTY machine is available for use by inmates screened and authorized by medical as having severe hearing or speaking impairment. All calls through them are 'collect.' You can obtain a TTY machine by submitting a service request form (KYTE) if you have a documented medical need for it.

INMATE SERVICES

LEGAL AID

Law Library

You may request law library access by submitting a service request form (KYTE) to the law library coordinator. If you are eligible your name is placed on the list for regularly scheduled attendance. You may be removed from the attendance list if you refuse to attend once. You will be removed from the list if you refuse to attend twice in a row. You will need to submit a

new service request form (KYTE) if you wish to attend after being removed from the list. Law library is only available during your housing units scheduled time.

You must stay for the complete session so use the restroom before you attend (there is not one available in the law library).

Typing paper is provided in the law library for legal use only. You may not take unused typing paper out of the library. If you remove blank paper or you are found to be using it for personal reasons, you will be subject to disciplinary action.

Disciplinary segregation inmates may not attend the law library, but may be provided with certain legal materials as necessary. Inmates who represent themselves (pro se) may request specific materials by submitting a service request form (KYTE) to the law library coordinator.

Legal Forms

The law library has forms pertaining to criminal matters. You may request forms from the law library coordinator if you represent yourself (pro se). You need to put the specific form number on your service request form (KYTE). The only civil forms available are habeas corpus, general tort, and civil rights forms.

Notary Services

A notary public is only required on documents that have the notary public signature, (i.e. affidavit, Portland Police Bureau property release form, or a power of attorney form). Such forms require a witness of your signature. You may request notary service via a service request form (KYTE) but it is a privilege, not a right. Counselors may limit notary service and will only notarize documents requiring it. Documents for minor children visitation will not be notarized.

FOOD SERVICES

You will be provided three nutritious meals each day. You will have 20 minutes to consume meals, (unless an emergency occurs). All food must be consumed at meal time or thrown away. Food stored in your cell or bunk from the meal trays is considered contraband. Inmates shall address special diet requests (medical or religious) to medical or the chaplain using a service request form (KYTE). This request must be submitted for each new custody.

COMMISSARY

Ordering Commissary

A commissary order schedule is available in each housing unit. You can purchase commissary 2 times per week. To receive commissary, complete a commissary order form the day your housing unit is scheduled to order. Write your name, housing assignment and inmate ID number legibly and place it in the mail container. Non-indigent items will only be

supplied if you have a sufficient positive balance. Commissary orders are deducted from your account balance.

If you receive an incorrect item in your order, you can send that item back with the deputy's verification. Credits, returns, etc. are only issued with deputy verification. The deputy must be the one making the notation on the paperwork.

Returned commissary is processed in the afternoon on the day it is received, depending on workflow. In some cases it may take an extra day to process.

Pizza Orders (MCIJ only): To order pizza (limit of 2) those with funds must fill out a pizza form and submit it on the scheduled day. Orders may not be cancelled and no refunds will be made.

Commissary Restrictions

- Purchases may not exceed **\$50.00** per order (subject to change);
- Commissary items in your possession **may not exceed \$50.00 in value**;
- The commissary unit will deny item(s) once the purchase total is reached;
- Inmates on disciplinary status may ONLY order hygiene items and envelopes;
- Incomplete, inaccurate or illegible commissary order forms will not be processed;
- Your commissary order may follow you if you move to another housing area.
Depending on when your order was submitted you may have to reorder from your new location;
- The commissary unit only provides a statement of your account balance for charges of the preceding 90 days. Statement requests cost \$2.25 each;
- After 7 days with less than 1 dollar on your account you may order indigent commissary items;
- Indigent inmates will be charged for certain services. Money received by indigent inmates will be applied to debts that they owe.

Reading Glasses / Eyeglasses / Contact Lenses

Inmates can order one pair of *reading* glasses per incarceration from commissary. Possession of more than two pairs of glasses (1 each personal and reading), or glasses that have been altered or are broken will be considered a rule violation: 'possession of contraband'. Indigent inmates must contact their housing unit counselor for eyeglasses, as they are no longer considered an indigent item.

Those in need of prescription glasses or contact lenses must have them delivered by friends or family. You can initiate the delivery or exchange process by contacting medical via service request form (KYTE). Once approved they may be brought in for you with the following stipulations:

- You may possess one pair of prescription glasses or contact lenses;
- Glasses and contact lens containers are to be unadorned, un-tinted and un-mirrored (no ornamentation), and in good shape mechanically; tinted glasses are permitted only when authorized by a medical provider.

LAUNDRY SERVICES

Linen exchanges are conducted once per week. Blankets may be exchanged for clean ones after 120 days. Clothing exchanges will be conducted for all inmates twice per week. If you are going to be out of your housing unit during clothing or linen exchange fill out a clothing slip with your sizes and give it to your housing unit deputy.

Exchanges are made on a one-for-one basis. You must turn in an item to receive a clean one. Inmate workers may exchange clothing more frequently depending on work assignment or as determined by the supervising deputy. You are responsible for all clothing and linen items issued to you. Report torn or damaged clothing or linen to the housing unit deputy.

Intentional damage to clothing or linen will result in disciplinary action and may result in restitution for replacement of the item(s).

Authorized clothing and linen:

- 1 T-Shirt
- 1 Blue shirt
- 1 Pair of boxers
- 1 Blue pant
- 1 Pair of socks
- 1 Pair of sandals
- 1 Pair of flip flops (commissary item)
- 1 Pair of deck shoes (commissary item)
- 2 Sheets
- 1 Pillow case
- 2 Towels
- 2 Blankets

Staff will regulate issued clothing size. You must be fully dressed when you are not in your bed, in the shower, at recreation or actively working out. Pink shirt and pants are the minimum requirement when you are exercising or in active recreation. You are only authorized to wear sandals, deck shoes or medically issued shoes outside your housing area.

Medical providers may prescribe / authorize 1 pair of medically issued shoes to inmates for a serious medical condition. Inmates who are authorized special items receive a special handling form. Do not lose it. A deputy may ask you to produce it to verify you are medically approved to possess the item.

Females may receive and possess two pair of underwear, one nightgown (not to be worn outside of housing unit), and one bra (jail issue); Female Work Crew inmates may possess two bras. Female inmates may have a special needs bra with medical authorization (special handling form required).

COUNSELING SERVICES / INFORMATION

Service Request Form (KYTE)

Service request forms (KYTE) are available in your housing unit and are used to communicate with various Sheriff's Office staff including the hearings officer, counselors, classification, chaplains, education, records and property / commissary. They may be used to inquire about general services provided in these various areas **but are not used to request medical services or to file grievances.** Using the service request form (KYTE) in an excessive and / or harassing manner will result in disciplinary action.

Counselors

Counselors can help orient you to the jail system and assist you with jail related issues. They help coordinate access to community support systems and coordinate services with pre-trial, probation / parole and community programs. They conduct alcohol and drug screenings, determine appropriateness for programs, and help with pre-release planning (clothing, housing, employment, food, and mental health resources). They provide information on educational programs and conduct groups on various self-help topics.

Veteran Services

Counselors partner with the Veterans Administration and County Services to provide screening of eligibility and coordination of benefits and resources. If you are a veteran, submit a Service Request Form (KYTE) requesting contact.

RECORDS

Copies of Your Jail Record

Copies of your Multnomah County Jail record printout can be obtained from the MCSO Records Unit for a fee; the fee is set by county ordinance. Send a service request form (KYTE) to the records unit with specific information (arrest dates, court case numbers, etc.). The records unit will estimate your cost and return a 'deduction form' to you.

You must sign and return the deduction form to records prior to receiving a printout. Records will then send copies, and the cost will be deducted from your account.

Time Calculations

Many factors are used to calculate a release date. If you dispute your release date, submit a service request form (KYTE) to the Corrections Records Unit with your specific concerns and questions. Allow 2 weeks for a response. If you are not satisfied with their explanation of the time calculation, contact your attorney.

Good Time and Work Time Credit

Criteria used in establishing good time and work time credit:

- A judge may authorize (or deny) good time, or work time credit;
- Revoked parole violators are not eligible for good time or work time credit;
- Work time credit can begin once you are sentenced and have been hired as a worker (see Work Time Credit page 38);
- Work time credits are never applied to prior time spent in custody before sentencing;

- No work time is given to “credit for time served”;
- You do not receive credit for time spent on release programs (i.e. recog, PRS, Close Street Supervision);
- Good time lost as the result of disciplinary action will affect release date projections.

Program Services

The Programs Unit offers a wide range of individual and group counseling services to inmates. These services are limited in resources and schedules and may not be offered at each facility. While your participation is voluntary, it is encouraged. Participating in the various services may increase your chance for a successful transition from jail to the community at the time of your release.

Group program services are available to address certain need areas, including:

- Alcohol and drug addiction;
- Mental health;
- Cognitive change;
- Anger management;
- Domestic violence; and,
- A variety of general life skills.

For information on specific groups you may submit a service request form (KYTE) to a counselor or check in your housing area for posted information.

Photocopy Requests and Charges

If an attorney represents you, legal forms and requests for copies of personal legal materials are to be made to your attorney.

If you do not have legal representation you may submit a service request form (KYTE) to the law library coordinator to obtain legal forms and photocopies. **You must be specific in your requests as the law library coordinator may limit the number of copies made.** All copy requests will be processed in a reasonable period, typically within 3 working days. There is a 15 cent per page charge. For indigent inmates the charges will be recorded and deducted from your account as monies are received. In certain circumstances, you may not be charged for reasonable and necessary copies of materials that are not in the facility law library (i.e., certain county law library materials or some forms).

MENTAL HEALTH

The mental health team provides services 7 days a week at MCDC / MCIJ. Mental health staff are available 24 hours a day at MCDC. They provide crisis intervention, suicide assessments, release planning and general mental health services. If you are in need of mental health services, please submit a medical request form (MRF). For urgent matters contact your housing unit deputy.

INMATE ACCOUNTING SYSTEM

Inmate Trust Accounts:

Cash Account: Established with funds that you come into custody with or have deposited for you.

Debt Account: Will be created when you have a negative balance. If you have no funds and receive certain services while in custody your account will be charged and show a negative balance.

Other Funds owed: Long term debt (for example, outside medical charges, charges as a result of damage to the facility).

Self-Bail: Money that you come in with or that is deposited for you, and which is specifically designated for the purpose of posting self-bail. This account will remain open for 7 days. If, at review, it is determined that the funds are no longer being held for that purpose, they will be transferred to your cash account.

Deposits to the cash account will be split, with 70% to the cash account, and 30% to debt or other funds owed. 100% of booking deposits and labor credits are posted to the cash account.

Deposited Money

Funds may be left for you in the form of cash or credit card through the kiosk system. Kiosks are located in the MCDC, MCIJ and Court House lobbies. Inmate and telephone account deposits may also be made via the internet at www.touchpayonline.com. This website provides a list of offsite kiosk locations that accept deposits. The ID number on your wristband and the Multnomah County pay location code (297204) are needed for deposits.

At your release you will receive any positive balance in the form of a debit card. If your balance is over \$9,500 the remaining balance will be received via check. **If you have a negative balance you will not receive money upon release. The negative balance will be carried over if you return to custody.**

PROPERTY

At Booking

The Sheriff's Office accepts only your personal property (i.e. wallet, jewelry monies, etc.). You receive a pink property receipt for it. Once personal property is sealed in a property bag the property unit will not open it to retrieve items.

Oversized property (backpack, duffle bag, bicycle, etc.) is kept by the agency that arrests you. Some agencies store property for only sixty days. If you are in custody, someone you designate can contact the arresting agency to pick up property for you. The arresting agency may require your written and notarized permission from the person who picks up your property.

Exchange / Release Forms

To release clothing, money or property, you must fill out the appropriate form (personal clothing exchange, personal trust fund release or personal property release form). **All forms**

must be signed in the presence of the deputy after you show your wristband as proof of identification. Place completed forms with outgoing mail.

Property Release

The person you have designated to release clothing, money and / or property to must present picture identification. Releases and exchanges happen between the hours of 10:00 a.m. and 7:00 p.m. Monday thru Friday and 7:00 a.m. until 10:00 p.m. on Saturday and Sunday.

Requests expire 14 days from the date of authorization. Allow 2 working days for the release form to be processed. If you release your property **you must release all of it** to a designated person.

Money Release

Cash account funds can be released to a third party by the inmate in an amount of up to \$500. This can occur no more than twice per month, unless approved by a Facility Commander. You may not release money to another inmate account.

Personal Clothing Exchange / Release

You are allowed one personal exchange (exchange of pants and shirt) while you are in custody in Multnomah County. Exchanges are permitted when:

- You are scheduled for a jury trial or for sentencing;
- You are being transported by commercial airline;
- Your personal clothing is inappropriate for the current climate (i.e. swimsuits in December, verified by MCSO staff);
- You have had a substantial change in physical size (as verified by the housing deputy);
- No clothes are present at the time of release;
- The court issues an order.

Requests for exceptions to the clothing exchange guidelines are made on a service request form (KYTE) to the facility commander. If you need clothing for trial, contact your attorney. They can arrange to bring trial clothing to the courthouse jail on the morning of your trial. If you do not have an attorney and have trial, you may do a one-time-only clothing exchange within the facility. The property unit will only exchange pants and a shirt.

Do not submit a request for a clothing exchange if you are going to court on a U.S. Marshal or Immigration hold unless directed by the specific agency.

Personal Items in Housing Areas

You may keep the following personal items in your cell or bunk drawer:

- Legal materials;
- Faith based materials;
- Approved commissary (\$50 limit);
- Personal mail;
- Official mail;
- Jail issued items;

- 4 personal / jail books and / or magazines total;
- Authorized medications;
- No more than 5 jail issue pens;
- 1 drinking cup (MCIJ only);
- Authorized clothing items;
- Eyeglasses or contacts and lenses container; and,
- Program related material.

You are responsible for your own belongings. Maintain them in good order. You are expected to keep all your personal possessions inside your assigned bunk drawer (MCIJ) or under your desk (MCDC). Extra storage needs will be addressed on a case by case basis by the facility commander. You may purchase a combination lock for your drawer from commissary.

NOTE: If you are housed at MCDC possession of a lock is considered contraband.

Your property may be limited for sanitation and security reasons. Excess property can create a fire hazard so you may be required to mail out, or arrange to have someone pick up excessive property. Address a service request form (KYTE) to the housing unit sergeant to facilitate this process. Subscription newspapers will be considered contraband if not discarded after 24 hours. Subscriptions are counted toward the 4 book/magazine possession limit.

INMATE HEALTH CARE

Access to Health Care

Access to Corrections Health and its related services may be obtained in one of the following ways:

1. If you are having a medical emergency let a deputy or staff member know right away.
2. An initial screening was done by a nurse when you were booked into the jail.
3. Within two weeks after booking you will meet with a nurse to complete a more in depth health care assessment. At this visit, tell the nurse about any medical, dental or mental health conditions or medications you need so they know how to help you. You will not be charged for this assessment.
4. If you need to see a provider, nurse, dentist or mental health consultant, submit a medical request form (MRF) and put it in the MRF box in your housing unit. You will be charged \$10 only if the MRF request results in an on-site medical provider visit. You will not be charged for other MRF requests.
5. The medical request forms are collected once a day and reviewed by medical staff. Someone will call you, see you, or send you a letter about your request. If a nurse decides that you will need to see a medical or dental provider, they will schedule a visit for you and you will be charged \$10. You will not be charged for mental health nurse practitioner or psychiatrist visits.
6. When filling out a medical request form (MRF) include your name, ID number, housing unit/bed and date of request. You can include any medical/dental/mental health needs you have.

Mental Health

The mental health team provides services 7 days a week at MCDC and MCIJ. Mental health staff are generally available 24 hours a day at MCDC. They provide crisis intervention, suicide assessments, release planning and general mental health services. If you are in need of mental health services, please submit a medical request form (MRF). For urgent matters, contact your housing deputy. You will not be charged for any mental health services that result from your request.

Medical Fees

1. You will not be denied health services because you have no money.
2. You will be charged \$10 only when your medical request form results in an on-site medical doctor/dentist/nurse practitioner clinic visit.
3. You will not be charged for mental health consultant evaluations or mental health provider clinic visits.
4. You will not be charged for doctor or nurse practitioner evaluations scheduled by Corrections Health and not requested by you.
5. You will not be charged for the nursing screening done in booking or for the nursing assessment done before your 14th day in jail.
6. You will not be charged for wound care or dressing changes.
7. You will not be charged for fingerstick blood glucose tests
8. You will not be charged for medications.
9. You will not be charged for blood tests, EKGs or x-rays.
10. You will not be charged for referrals to outside medical specialists or hospital stays.
11. You will not be charged for emergency care.
12. You will not be charged for inmate worker job-related accidents/injuries (exams, provider visits or medications).
13. Submit a Corrections Health grievance form for any concerns/questions about your medical billing. General questions about your account balances, debits/credits are submitted to property.
14. If you have only a U.S. Marshal or U.S. Immigration hold you will not be charged for any medical services. If you have Marshal or Immigration holds and State or County charges, you will be charged for medical services.

Refusal of treatment/services

If you wish to refuse your scheduled medical, dental or mental health appointment(s), you must go to the medical clinic and sign a "refusal of treatment" form.

Medications on Commissary

There are over the counter medications available through commissary. You may order these products to treat minor health issues. Selected over-the-counter medications are available for indigent inmates. **They are identified on the commissary form by an asterisk (*).** Indigent items and their costs are subject to change. The cost of each indigent item you receive is maintained as a negative account balance. You may have in your possession:

- Aspirin. 325 mg tabs (2 pills per packet).....5 packets total
- Ibuprofen (2 pills per packet).....9 packets total
- Tums (for heartburn).....1 roll per week

Alcohol and ulcers damage the stomach, producing pain and sometimes bleeding. Aspirin further damages the stomach and reduces the ability for the blood to clot, producing more pain and bleeding.

Warning: High blood pressure is common for people under stress. Many ‘cold pills’ further increase blood pressure.

Medical Rounds

When Medical Rounds are called:

- Get in line immediately with a cup of water and remain standing there. The next person in line waits about 6 feet from the med cart until they are called forward. Do not share water or cups. You may not be seen if you are late to med line;
- Stand quietly, in single file. For hygiene reasons keep your hands out of your pants;
- When the nurse or med aide has called you forward state your name and show your wristband. You may be denied medication if you do not have your wristband on;
- Swallow your medication in front of the nurse or med aide. Any attempt to save or trade medication will result in disciplinary action and possible discontinuation of the medication.

You may receive medication to keep on your person (KOP/Keep-On-Person). It will be in the form of a ‘blister package’ or bottle (nitro). Only take KOP medication as prescribed:

- Do not pop out your meds until it is the correct time to take them;
- Do not give, trade, or sell your medication to anyone;
- Do not save medication. Medicine kept beyond the prescription expiration date will be considered contraband. Ask the nurse or medication aide if you do not see the expiration date on your medications;
- If you decide to stop taking your medication, tell the nurse at the next medication round;
- Do not tear off the label at the top of the blister card. If you do your blister cards will be taken from you;
- If you have any questions about your medication ask any medical staff.

SANITATION

Hygiene Kits

If you are not going to be released from custody you will be offered a hygiene kit containing basic personal grooming items, 2 envelopes, a writing pad and pen. If you accept the kit, a fee will be charged to your account. Inmates with no money (indigent) can accept a hygiene kit. The fee for the kit will show on your account as a debt. Money you receive while you are in jail will first be applied to any debt you have on your account.

Personal / Dental Hygiene

Keep your person and your bunk area / cell clean and neat at all times. Make your bed neatly and keep it intact when not in use from 9 a.m. until 9 p.m. (deputies may make exception for certain work crews). Clean your bunk area / cell daily, and identify damaged or broken items in your area and report them to a deputy for repair.

Shower during your scheduled walk time. You are required to shower at least twice a week. Inmate workers are required to shower daily. Staff members may direct you to trim your toenails or fingernails if they deem them to be a health or security hazard.

The facility will provide you with toilet paper, soap, razors, hair clippers, fingernail clippers, and sanitary napkins (for females). Hair clippers, razors, and fingernail clippers are not allowed in your cell or bunk area. You are responsible for cleaning the area and any equipment you have used when you are finished grooming.

The facility will provide you with a toothbrush and toothpaste. Most dental problems are caused by not brushing your teeth. Tooth brushing removes plaque and food particles from the outer, inner, and biting surfaces of your teeth.

POPULATION RELATED HEALTH ISSUES

Hand Washing

One of the best protections against illness is hand washing. Effective hand washing lasts at least 30 seconds. Lather your hands with soap under warm water and scrub the back, front and in between the fingers of each hand. Dry off with a towel. Be conscious of what surfaces your hands come in contact with and wash your hands often.

Coughing and Sneezing

Serious respiratory illnesses are spread by coughing or sneezing. To help stop the spread of germs cover your mouth with a tissue when you cough or sneeze and put the used tissue in a waste basket. If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.

Smoking

Multnomah County facilities are tobacco-free institutions. All smoking, tobacco use, and possession of tobacco products is prohibited. Tobacco products are considered contraband and will be confiscated. If you are found in possession of tobacco products or materials, you will be subject to disciplinary action.

Communicable Disease Guidelines

You will be screened for tuberculosis (TB) when you are booked into jail and possibly again during your stay in jail. To protect you from communicable diseases such as hepatitis and AIDS, and to prevent the spread of other diseases:

- Do not share cups, combs, toothbrushes, clothing, bedding, towels, food, or utensils;
- Wash your hands often for at least 30 seconds using soap and water;

- Keep your hands out of your pants, and avoid touching your mouth, nose or eyes;
- Clean the hair and nail clippers, and razor, before and after each use;
- When available, use toilet sanitary covers.

Housing unit worker duties include cleaning areas soiled by bodily fluids, pus, blood, urine, vomit, feces, or spit. Use safety and sanitation precautions in any inmate worker duties. Any supplies you need to complete cleaning tasks will be provided for you as required under OR-OSHA rules and regulations. Consult with the deputy about precautions and disposal before cleaning potentially hazardous substances.

Body Fluid Precautions (BFP's)

If you have an infectious communicable disease, you must:

- Not share any items with others, especially food, food trays, and eating utensils;
- Disinfect the telephone, hair clippers, and shaver heads after use;
- Wear a mask when out of your cell if you have an airborne transmitted, communicable disease;
- Contain the drainage of any wound with a bandage and wash your hands often. Medical personnel will instruct you in wound care and can provide bandages at med rounds. Deputies will also provide them.

Inmates with draining wounds **cannot** work in the kitchen per medical unit policy.

Methicillin Resistant Staphylococcus Aureus (MRSA)

MRSA is a 'staph' infection that is easily transmitted from person to person especially in places like jail where personal hygiene is casual. You are more vulnerable to MRSA if you have HIV, use drugs or are sick in any way so be careful to:

- Wash hands, arms and face regularly;
- When available, use hygiene covers on the toilet;
- Don't pick at or play with breaks in the skin;
- Don't touch other people; and,
- Use appropriate cleaning solution on door-handles, telephones, tabletops, showers, etc.

If you think you have MRSA tell a nurse or fill out a medical request form (there is no charge for MRSA related MRF's) and:

- Keep wet or leaking sores bandaged / covered;
- Wash your hands, arms and face and don't touch others;
- Follow the directions of the nurse.

Transmission of a disease by reckless behavior can result in criminal charges.

INMATE PROGRAMS AND ACTIVITIES

EXERCISE

Exercise and recreation options vary by classification status, and from facility to facility. At MCDC non-disciplinary inmates have access to scheduled recreation outside of the housing

unit. Non-disciplinary housing at MCIJ adjoins open air recreation areas which are open for use during walk time when a deputy is present. In each housing unit there is simple stationary exercise equipment. This equipment is available for use during scheduled walk time. Use work-out equipment according to its design. **Do not manufacture exercise devices or use objects to work out with that were not provided by the jail specifically for exercise.** They are considered contraband.

LEISURE ACTIVITIES

For your leisure time the housing unit may have approved board and card games, books, and television. Deputies have discretionary control over the television hours of use, volume and content. Art supplies are available from commissary.

EDUCATIONAL AND REHABILITATION PROGRAMS

Education and Employment Services

You may submit a service request form (KYTE) to a counselor to learn about educational and employment resources. Education services are available to help those up to age 19 (or to age 21 who have an independent education plan) to obtain their high school diploma.

Alcohol / Drug Treatment Referral

Counselors make a referral to treatment for those who are fully sentenced, have at least 3 weeks remaining to serve and have 'early release to inpatient treatment' authorization per court order. Probation / Parole officers can also make referrals to residential treatment. Counselors assess your appropriateness for treatment before a placement is made so not everyone with authorization for early release gets placed into treatment. **You may not be placed into treatment if you have engaged in problematic behavior.**

Funding for treatment and the number of treatment beds is limited so not everyone who is referred gets 'placed'. If you are interested in a treatment referral you may submit a service request form (KYTE) to a counselor requesting consideration.

WORKING INMATES

Sentenced inmates may be required to work by Oregon law. We select some inmates to work in housing units, the kitchen, laundry, work crews and to do various custodial tasks in the jail.

1. Housing unit workers are selected by the housing unit deputies.
2. Facility workers are selected by staff using classification information and are housed in the inmate worker housing units.

3. Work crew workers are screened by the counseling unit for outside work and are housed in designated work crew housing.

Do not send a service request form (KYTE) to request screening for work assignments.

When assigned to a worker position, you will be properly equipped for those jobs requiring personal protective equipment, (i.e., gloves, oven mitts, safety glasses, hearing protection, etc.), according to OR-OSHA standards and State Law. Inmate workers who fail to wear or use issued protective equipment will be fired and may face disciplinary action.

Inmate Worker Pay

Inmate worker positions earn \$1.00 per day. Inmate workers may receive work credit toward their sentences based upon the status of their incarceration. If you volunteer (not hired into inmate worker status) to work you will not get work time credit or pay. **Inmates with US Marshall holds may not be hired as inmate workers.**

Pay is credited weekly and is calculated on a Saturday through Friday work week. It is generally posted to your account shortly after the new work week starts. Keep your own work records in case you need to resolve work time / pay conflicts. There will be a short duration from when you start working, to when money appears on your account (see Inmate Accounts page 33 for more information). If you have any outstanding debt from a past custody, your worker pay will be applied to it until it is paid off.

Work Time Credit

If you are eligible for work credit, the submittal of your hire card to the MCSO records unit by a deputy starts work time credit accrual. Credit starts the day you are hired. It is calculated on the amount of time left on your sentence after all other credits have been deducted (see time calculations for more information).

If you are unable to work due to a disciplinary sanction, medical restriction, or change in classification, a fire card will be submitted to records and your work credit will be recalculated. If you are placed on medical lay-in for more than three consecutive days, a fire card may be submitted. Once you are medically cleared for work, you are eligible to be re-hired.

ACCESS TO FAITH BASED SERVICES

MCSO endeavors to respect each person's right to practice their faith. The jail has a responsibility to provide a secure facility, not necessarily a religious one. The sheriff has provided a Chaplains unit to help provide what is reasonable to the practice of a person's faith, as long as the activity does not compromise security needs, conforms to the safety and health requirements of the facility, and the practice does not place a burden on jail resources and staffing. Special needs requests for faith based items not issued by the facility must be approved by the facility commander.

Chaplains

Chaplains are available for your religious guidance [questions, concerns and matters for prayer] while you are in custody in Multnomah County. They can assist in arranging a visit with your minister or a leader from your religious group. If you have an emergency that requires a chaplain immediately, briefly explain the situation to your housing unit deputy. All emergencies are verified and handled as soon as possible.

Faith Based Diets

The chaplains unit is responsible to help inmates with their religious beliefs about food. If you are in need of a faith based diet, please send a service request form (KYTE) stating your religious group and the choice of either a vegetarian or vegan diet. If your religious group requires you to have a diet, it will be given. If it does not require a diet, the chaplain will talk to you. These facilities are already pork-free. To cancel a faith based diet you must also submit a service request form (KYTE) to the chaplain.

Inmate Marriages

Inmates who desire to be married while in custody shall submit a service request form (KYTE) to the chaplain. The facility commander will authorize or deny the request in writing. Inmate marriages may be denied when an inmate is on disciplinary status, or when conducting the marriage would cause a legitimate safety and security concern. Requests must be submitted 30 days prior to the requested marriage date. The inmate and the intended spouse are responsible to arrange for an officiant and pay for / arrange for the marriage license. USM prisoners must seek approval from the US Marshalls to get married.

Acronyms

AA	Alcoholics Anonymous
ADA	Americans with Disabilities Act
AIDS	Acquired Immune Deficiency Syndrome
BFP	Body Fluid Precaution
DNA	Deoxyribonucleic Acid
EKG	Electrocardiogram
GED	General Education Diploma
HIV	Human Immunodeficiency Virus
ID	Identification
INS	Immigration and Naturalization Service
KOP	Keep on Person
KYTE	Service Request Form
MCDC	Multnomah County Detention Center
MCIJ	Multnomah County Inverness Jail
MCSO	Multnomah County Sheriff's Office
MRF	Medical Request Form
MRSA	Methicillin-Resistant Staphylococcus Aureus
NA	Narcotics Anonymous
OIC	Officer in Charge
PIN	Personal Identification Number
PO	Probation / Parole Officer
PREA	Prison Rape Elimination Act
PRS	Pre-Trial Release Services
PV	Probation / Parole Violation
RECOG	Recognizance
STAPH	Staphylococcus
TB	Tuberculosis
TTY	Teletypewriter (for the hearing impaired)
UA	Urinalysis
USM	United States Marshals

OSH PATIENT HANDBOOK

Under PSRB (Psychiatric Security Review Board)



Oregon Health
Authority



OSH Under PSRB Handbook
Revised February 2020

UNDER PSRB: WELCOME

Welcome, vision and mission

Welcome to Oregon State Hospital. Our role is to provide you with a safe and comfortable place where you can work on your health and wellness goals.

We know everyone's circumstances are different. By working with your treatment team, we will help you create your own plan to meet your treatment goals.

This handbook will help you learn more about Oregon State Hospital and answer some questions. If you still have questions after reading this guide, feel free to ask any of your treatment team members for help.

Our vision

Oregon State Hospital is a psychiatric hospital that inspires hope, promotes safety and supports recovery for all.

Our mission

Our mission is to provide therapeutic, evidence-based, patient-centered treatment that focuses on recovery and community integration in a safe environment.

What recovery means

Oregon State Hospital recognizes recovery as a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. Recovery is built on self-determination and access to evidence-based clinical treatment and recovery support services for all.



UNDER PSRB: WELCOME**Table of contents****Welcome**

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UNDER PSRB: WELCOME

A culture of respect

Oregon State Hospital is an inclusive place. Everyone shares the responsibility for helping people here feel safe. That's why each person needs to treat others with dignity, support and respect. Please respect people's personal space and property.

Hospital staff also strive to meet the cultural and diversity needs of patients. Language interpreters are available to help patients communicate with others, and a broad variety of support groups are here to cater to patients' specific needs. A few examples include groups for veterans, people who hear voices, and people who identify as lesbian, gay, bisexual, transgender/transexual, questioning/queer, intersex and asexual/allies (LGBTQIA).

Hospital staff value people from all cultures, faiths, races, backgrounds, sexual orientations, gender identities, ages and abilities. Everyone plays a part in making sure patients and staff feel comfortable and protected.

If, at any time, you feel discriminated against, or if someone is not living up to the culture of respect at the hospital, please

- Speak with a staff member;
- Report to the Office of Training, Investigations and Safety (OTIS) at 503-689-5076 or 800-406-4287;
- Contact the Peer Advisory Council (PAC) at 503-490-4066; or
- Call Consumer and Family Services at 503-947-8109 in Salem or 541-465-2785 in Junction City.



UNDER PSRB: WELCOME

How long will I be here?

Patients come to the hospital for different reasons, so different rules apply to their hospital stay. The information below outlines the discharge process for your commitment type.

Why you are here

You are here because you were found Guilty Except for Insanity (GEI) of a crime. You are under the jurisdiction of the Oregon Psychiatric Security Review Board (PSRB), and the court decided you need hospital-level care to help you get better. People who plead GEI are usually under the jurisdiction of the PSRB for the maximum time they would have been sentenced if they had been convicted of their crimes.

Length of stay

The hospital's goal is to support your recovery and eventual conditional release from the hospital. This varies by person.

The PSRB decides when you may leave the hospital, based on your level of safety and recovery. As you recover, your treatment team will make every attempt to assist you with community placement.

What is a “conditional release”?

A conditional release means you are released from the hospital but are still under the jurisdiction of the PSRB. The PSRB may have different requirements for each individual related to their conditional release. For example, you may be required to participate in a specific kind of treatment or live in a certain part of the state.

The PSRB will continue to supervise you when you are no longer at the hospital. If you don't follow the conditions outlined in your release plan, the board may require you to return to the hospital. This is called a “revocation.”

Members of the PSRB include a psychiatrist, psychologist, lawyer, probation officer and a member of the public. None of the PSRB members work for Oregon State Hospital or the Oregon Health Authority.

How can I get conditionally released?

Before you can get conditionally released, your treatment team has to agree that you are ready for conditional release. Then the hospital's Risk Review group must agree you are ready for conditional release. At that point, the PSRB will be asked to approve a request for community evaluation by a community provider – such as someone who runs a group home.

The community provider will review your case for placement in their program or facility. If the provider thinks the placement is beneficial to you and the community, he or she will work with your treatment team to form a conditional release plan. The PSRB holds a hearing to decide if you should be conditionally released from the hospital.

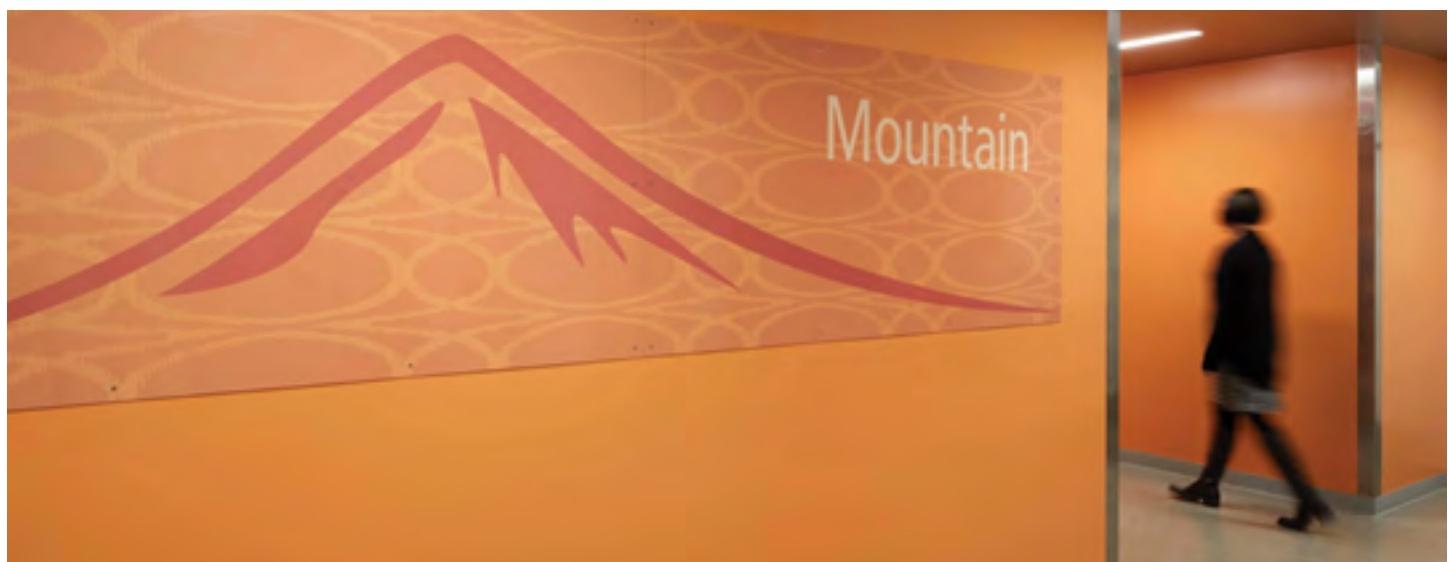
For more information about when you can get out of the hospital, please talk to a member of your treatment team.

UNDER PSRB: WELCOME

Your responsibilities

Staff need your input on how they can best meet your needs. Listed below are some of your responsibilities. Hospital patients provided the quoted information:

- Follow the hospital's instructions, policies and procedures, which are designed to support you and keep everyone safe. Please contact the Peer Advisory Council for more information, or if you need a copy of a policy.
 - ▶ *"If you are given conflicting information from staff, you can ask for a copy of the policy or procedure."*
 - Try to communicate with others in a respectful and considerate manner.
 - ▶ *"When people get frustrated, it's easy to swear and talk louder. Please do your best to stay calm and address people peacefully."*
 - Show consideration for other people's property.
 - ▶ *"If it is not yours, don't touch it."*
- Share your ideas to improve quality of care by filling out continuous improvement sheets, surveys, grievances, or by participating in Peer Advisory Council.
 - ▶ *"If you are not pleased with current treatment options, you need to share your opinion and ideas with others if things are to change."*
 - Participate in treatment.
 - ▶ *"You're in control of what you get out of (treatment)."*
 - Safety is a priority at OSH. Please be considerate of others.
 - ▶ *"OSH promotes the philosophy that 'people do well if they can.' There may be times some people don't feel safe, so it's your responsibility to let someone know how you feel. You can reach out to a staff member you trust for help."*



UNDER PSRB: YOUR RIGHTS

Patient rights

All patients retain their rights as provided by state and federal law. **There are rules and policies related to each of these rights to address safety and security concerns.**

Please refer to the appropriate section of your handbook for more information.

Disclaimer: The following is for informational use only and is not intended or implied to substitute for state and federal laws and regulations. For specific information, see ORS 430.210; OSH Policy 7.005 (Patient Rights); and program rules.

Patients have a right:

- To recognition, respect and dignity as an individual;
- To be treated under the least restrictive and most inclusive conditions and not be subjected to unnecessary physical restraint and seclusion;
- To be free from abuse or neglect, and to report abuse without being punished;
- To a humane living environment that affords reasonable protection from harm, and affords reasonable privacy;
- To impartial access to treatment, regardless of race, religion, gender, ethnicity, age or handicap;
- To be informed of the facility's rules and regulations regarding their conduct;
- To be visited by your friends, family, advocates and legal professionals – provided they are approved by both security and their treatment team;
- To send and receive mail;
- To be furnished with a reasonable supply of writing materials and stamps;
- To reasonable access to telephones;
- To participate in decisions concerning the limitation of visitors, telephone calls or other communication;
- To religious freedom;
- To daily access to fresh air and the outdoors;
- To wear your own clothing;
- To a private storage area and access to it;
- To be given reasonable compensation for all work performed, other than personal housekeeping duties;
- To participate in your plans for individualized treatment and discharge, explained in terms they can understand;
- To review your individualized treatment plans;
- To confidentiality of your medical and mental health records;
- To not receive services without informed consent, except in a medical emergency or as otherwise permitted by law;
- To receive medication only for your clinical needs;
- To be informed of benefits, possible side effects, and risks of medications and treatment procedures;
- To decline medication and treatment to the extent permitted by law; and to be informed of the medical consequences of your actions;

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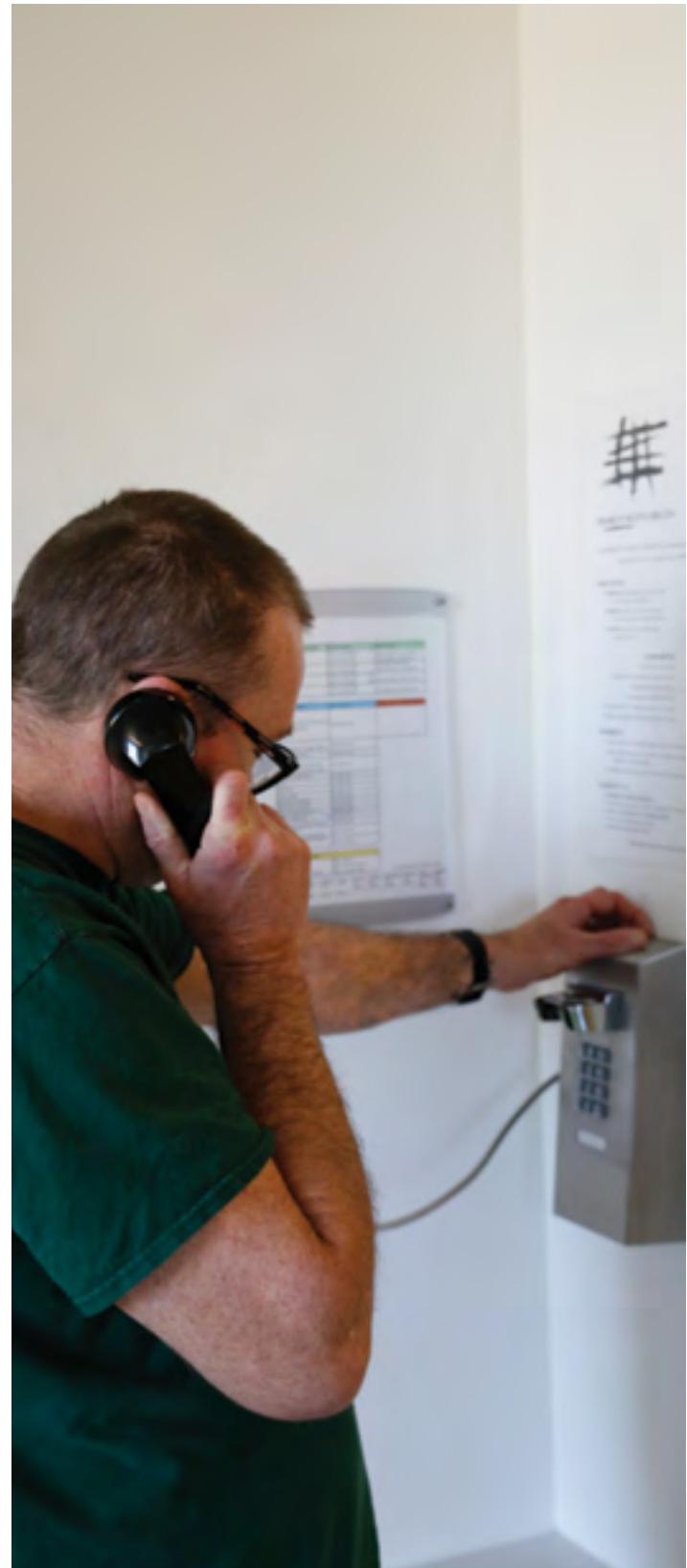
Patient rights continued

- To develop advance directives for your care in the case of future serious medical or psychiatric illness;
- To access your medical and mental health records upon approval from the treatment team;
- To not participate in experimental medical treatment or research without voluntary informed written consent;
- To submit grievances regarding the violation of patient rights and to have those grievances reviewed in a fair, timely and impartial way, and
- To exercise the rights specified in this document without any form of retaliation or punishment

If you have questions or concerns about issues related to these rights, you can:

- Talk with staff on your unit and your treatment team
- Contact OSH Consumer and Family Services
 - ▶ Salem: 503-947-8109
 - ▶ Junction City: 541-465-2785
- File a grievance
- Contact the following:
 - ▶ Centers for Medicare and Medicaid Services (CMS) at 800-447-8477;
 - ▶ The Joint Commission at 800-994-6610;
 - ▶ Disability Rights of Oregon at 800-452-1694;
 - ▶ the Office of Training, Investigations and Safety (OTIS) at 503-689-5076 or 800-406-4287; or
 - ▶ an attorney.

More information on these organizations is available in the Resources section of your handbook.



UNDER PSRB: YOUR RIGHTS

Grievances

If you have a concern or a problem, the staff on your unit and your treatment team are available to help you. Your first step is to talk with them in person, or write your concerns down on a piece of paper and give it to them. They will work with you to try to find a solution.

If you continue to have concerns, you can use the patient grievance process. To file a grievance:

- Ask staff on your unit for a grievance form. They can help you find a form, or fill one out, if needed.
- Fill out the form and turn it in to the grievance box on your unit.
- Staff will meet with you to review your grievance and work with you to help solve your problem.

*If you are not satisfied with the grievance response, or if staff don't respond to your grievance within 20 days, you can request an appeal. You must request the appeal within 14 days of receiving your response.

Please refer to the grievance instructions available on your unit for more information about the grievance process. Let staff know if you would like a copy of the Patient Grievance policy (7.006).

If you have questions or concerns about the OSH Grievance process, please contact Consumer and Family Services at 503-947-8109 in Salem and 541-465-2785 in Junction City.



UNDER PSRB: YOUR RIGHTS

Accessing your medical records

Under Oregon law, you have the right to request access to your own medical records. To make this request, ask unit staff for a copy of the “Request for Access to Records” form. Once you fill out the form, return it to someone on your treatment team.



A few things to keep in mind:

- Your doctor or nurse practitioner has five days to approve or deny your request. They can only deny your requests under limited circumstances.
- If approved, the hospital has five days to get the information to you. Depending on how much information you seek, some requests may take longer. If you don't receive it, follow up with your treatment team.
- You have the right to appeal a denial. Please see the “Request for Access to Records” form for additional information.
- If you believe information in your medical record is inaccurate, you have two options:
 1. For information that can be verified – such as your birth certificate or Social Security number – submit a “Request for Amendment of Health Record” form along with the supporting documentation (such as your birth certificate) to your treatment team.
 2. If you disagree with anything your doctor, nurse or other care giver added to your medical record, you can submit a “Patient Statement” form with your treatment team. This will become part of your medical record.

If you have questions about this process, or if you need help with filling out the forms mentioned above, please talk to someone on your treatment team.

UNDER PSRB: YOUR RIGHTS

Medical care

Your mental AND physical well-being are equally important. The nurses on your unit are here to help you get the attention you need – whether you have a bad cold, a toothache, or require more serious medical treatment.

Your unit nurses are the first people to talk to if you have questions about your health. Together, you will review your medications, treatments, symptom management and other useful information. They make sure the right people are contacted when you have questions or request information.

While you are at the hospital, you will be assigned a primary OSH medical practitioner from the hospital's clinic. The OSH medical clinic either has the following medical professionals on site or will refer you to a medical professional in the community. Some specialists may also come to OSH, as needed:

- Medical doctors (MDs)
- Nurse practitioners (NPs)
- Registered nurses (RNs)
- Licensed practical nurses (LPNs)
- Dentists
- Physical therapists
- Pharmacists
- Lab technicians
- Clinical dietitians
- X-ray technicians
- Cardiologists (heart doctors)

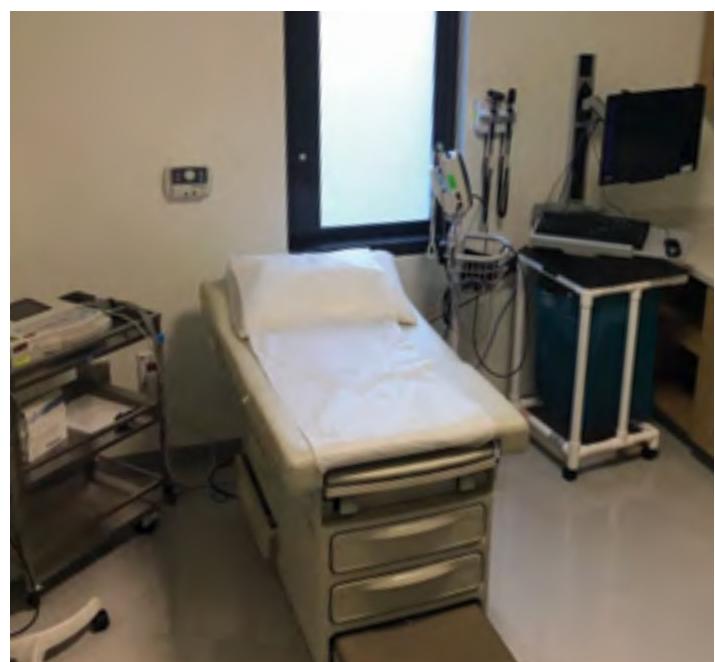
- Neurologists (doctors who specialize in the nervous system)
- Optometrists (eye doctors)
- Podiatrists (foot doctors)

The hospital is able to meet most of your medical needs through its clinics. However, if you need specialty care we do not provide, we will make an appointment with a specialist outside the hospital.

When may I talk to my medical doctor?

If you have concerns about your medical treatment or medications, you may request to speak with your medical doctor by asking one of your unit's nurses.

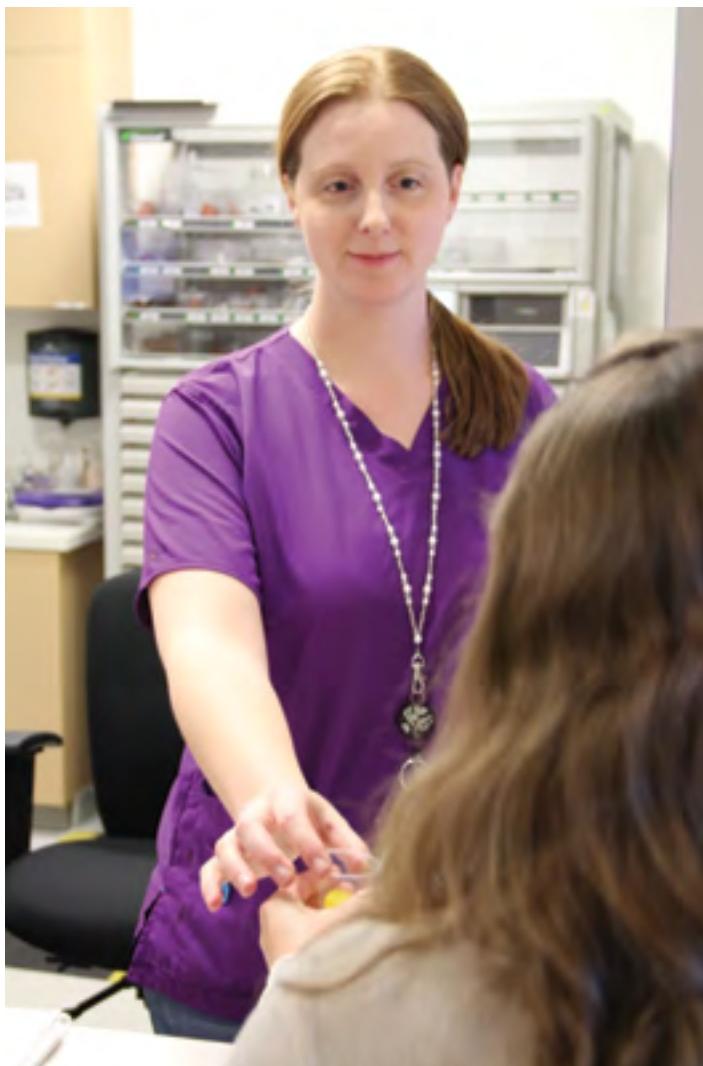
If you have an emergency, do not wait for these specific people. Contact any staff member immediately, and let them know what the emergency is.



UNDER PSRB: YOUR RIGHTS

Medications

Your doctor or psychiatric mental health nurse practitioner (PMHNP) may prescribe medication as a part of your treatment. You may take some of the medications on a regular basis, while others may be made available for you when you need them. Feel free to talk about your medications with your doctor, nurse or a pharmacist. They can answer your questions about new or worsening symptoms or side effects of the medications. They can also adjust your treatment, if and as needed.



Please come to the medication room window to receive your medication. Usual medication times are 8 a.m., noon, 4 p.m. and 8 p.m., but this could change depending on your individual needs. Unit staff will let you know when you can get your medications.

Every time you receive medications, nurses are required to ask for your name and date of birth to make sure they give the right medications to the right person at the right time. Please know there may be a wait involved to receive your medications.

If you have concerns about receiving the correct medications, you can always request to see your medication package before it's opened.

For more information, talk with unit staff, your treatment team, or request to talk to a pharmacist.

Informed consent

For many people, taking medication can be an important way to stabilize the symptoms of a mental health disorder. Your psychiatrist or nurse practitioner will meet with you to discuss the benefits, risks and alternatives to medications, as well as the option of not taking medications. Be sure to talk to your doctor or psychiatric mental health nurse practitioner if you are interested in taking medications.

Medications continued

Do I have to take medication?

The hospital can require you to take prescribed medication without your permission if there is an emergency, such as:

- A doctor or nurse practitioner must give you medication immediately to save your life or health; or
- Your behavior makes it likely that you could hurt yourself or someone else at the hospital unless you are medicated.

Can the hospital require me to take medication if there is no emergency?

If there is no emergency, the hospital can require you to take medications only if:

- Your guardian decides you need medication treatment*;
- As part of your commitment to the hospital, a judge has ordered that medication be used as part of your treatment (this rarely happens); or
- There is good cause (defined on right)

* Note: You are assigned a guardian if a court has determined you lack the capacity to make medication decisions on your own behalf on an ongoing basis. Your guardian has the legal authority to make decisions for you and can override your preferences concerning medications.

What does good cause mean?

- You can't make your own decisions about whether to take medication because you can't understand and weigh the risks and benefits of the treatment options;
- The medication is likely to help you;
- Medication is the most appropriate treatment for your illness; and
- All other treatments (other than medication) won't help you as well.

What happens if my doctor believes there is good cause to require me to take medication?

The hospital must follow specific steps before giving you medication without your permission:

- Your doctor must meet with you to talk about your medication options, which may include alternatives that could work better for you.
- A second doctor, who does not work for the hospital, must also meet with you. This doctor gives a second opinion about whether there is good cause to require you to take the medication.
- The chief medical officer or superintendent must consider both doctors' opinions and make a final decision about whether there is good cause to require you to take the medication.
- If the chief medical officer or superintendent decides there is good cause to require you to take the medication, you will receive written notice. The notice will tell you about the hospital's intentions and your right to request a hearing if you disagree with the decision.

Medications continued

I received written notice that the hospital has good cause to require me to take medication. What are my options?

You have three options:

1. Agree to take the medication.
2. Talk to your doctor about an alternative that may work better for you.
3. Refuse to take the medication and request a hearing. You can ask for hearings at any time you receive involuntary medications. This information is included in the paperwork you receive when the hospital seeks to treat you without your informed consent. Please note, if there is an "emergency order," you may have to take the medication before your hearing – despite your objections.

How do I ask for a hearing?

A patient is given notice that they may request a hearing, and then they may verbally ask for one or ask for one by signing the notice.

The written notice from the hospital will include a "Request for Hearing" form. If you do not ask for a hearing within 48 hours of receiving the notice, the hospital can begin treatment. However, you can still ask for a hearing at any time.

For help with representation at hearings, contact Kali Yost, LLC at PO Box 68749, Portland, OR 97268; 503-501-8117; or www.kaliyost.com.

What happens after I fill out and hand in my "Request for Hearing" form?

If you ask for a hearing, an administrative law judge will decide whether the hospital can require you to take the medication. If you want a hearing, fill out the form and give it to any nursing staff member. If you need help filling out the form, nursing staff can assist you. You can tell your doctor or a nurse that you want a hearing.

After you ask for a hearing, you will receive notice telling you the date for your hearing. Your hearing will usually take place within 14 days of the date you turned in your "Request for Hearing" form. During your hearing, you can have your appointed attorney represent you for free. If you choose to have an attorney represent you, he or she will contact you before your hearing. If you choose to have a private attorney at your expense, you must contact that attorney to arrange representation. Your attorney will help you decide if there are any witnesses who have information to help the administrative law judge make the decision.

If the court orders you to receive medication, please work with your doctor and nursing staff on how you would best like the medication administered. If, based upon the evidence at the hearing, the judge determines that the hospital has proved that it has good cause to medicate you, the judge will issue an order authorizing the hospital to give you medications without your consent. You have the right to request reconsideration or appeal within 60 days of the judge's order.

(Adapted from OAR 309-114-0000 through 0025 and Disability Rights Oregon Involuntary Medication Hearing Handbook, first edition- www.droregon.org)

UNDER PSRB: YOUR RIGHTS

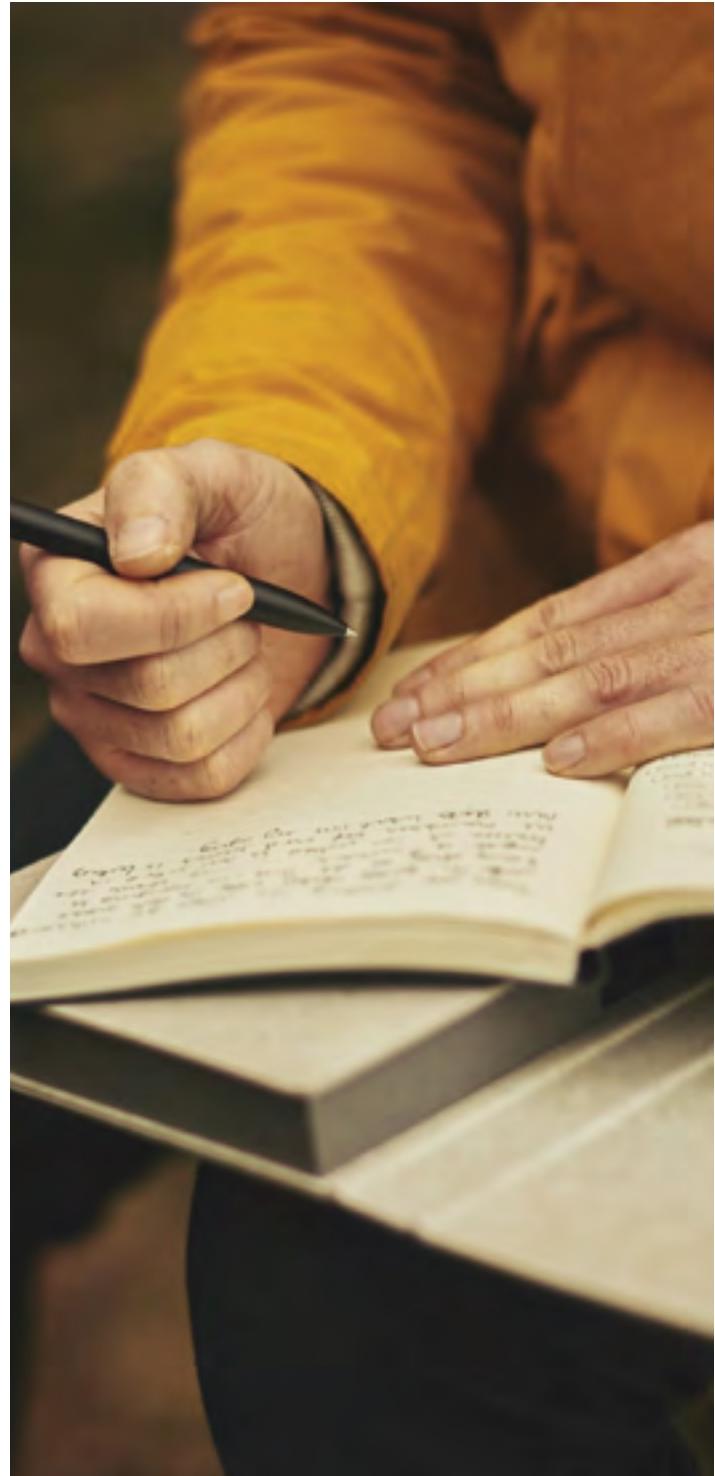
Advance Directives

As a patient at Oregon State Hospital, you have a legal right to complete an advance directive if you “have capacity.” Having capacity means that a court, your physician, or your psychiatric mental health nurse practitioner (PMHNP) has determined you can make and communicate health care decisions to medical providers.

Advance directives are written instructions – such as a living will – that outlines your wishes for health care in the event you are incapacitated. This includes end-of-life medical care and mental health care decisions. These are your expressed wishes; however, court orders, Oregon Revised Statutes and Oregon Administrative Rules may override your wishes while you are in the hospital.

- If you have capacity, the hospital may not limit your right to complete an advance directive.
- Hospital staff must provide you with an opportunity to complete an advance directive, including a declaration for mental health treatment.
- The hospital will honor your right to complete an advance directive and to review and revise your advance directive.
- If you need help completing or updating an advance directive, hospital staff will arrange for assistance.

Oregon State Hospital will make every effort to respect your wishes concerning advance directives. For more information, please ask staff for a copy of Policy 6.025 on advance directives.



UNDER PSRB: YOUR RIGHTS

Confidentiality

Protecting your health information is a priority for all OSH staff. In addition, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) guarantees certain levels of privacy rights related to your health information.

If you have questions or concerns about how your information is shared or used, please talk to your treatment team or contact Consumer and Family Services at 503-947-8109 (Salem) or 541-465-2785 (Junction City).

While in the hospital, you have the right to:

- Request a copy of your medical record (see the “Accessing Your Medical Record” section of your handbook);
- Request that staff talk to you about your private health information in a private place;
- Add comments to your medical record (see the “Accessing Your Medical Record” section of your handbook);
- Limit the information the hospital shares about your care;
- Find out with whom the hospital has shared information about you;

- File a complaint if you believe your privacy rights have been violated
 - ▶ By using the patient grievance process;
 - ▶ By calling the Department of Human Services/ Oregon Health Authority Privacy Office. For security concerns, call 503-945-6812 or email dhsinfo.security@state.or.us, and for privacy help, call 503-945-5780 or email dhs.privacyhelp@state.or.us., and
 - ▶ By calling the U.S. Department of Health and Human Services Office for Civil Rights at 1-877-696-6775 or by filling out an online privacy complaint form at https://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf.

How is my information shared by OSH?

Within the hospital, information about your treatment and your stay can be shared between staff, across departments, for the purpose of providing services directly to you.

Outside of the hospital, information may be shared for legal and other reasons. This includes, but is not limited to:

- Billing for your services;
- Helping with public health and safety issues. For example, OSH is required to report cases of tuberculosis to the Public Health Department, and
- Complying with the law. For example, sharing information with the state’s Psychiatric Security Review Board (PSRB) or as part of a lawsuit.

Confidentiality continued

The decision and process of sharing information outside of the hospital is made on a case-by-case basis. The hospital will never share more information than is absolutely necessary.

How is my information shared with my family and friends?

Friends and family members of OSH patients often call the hospital to find out if their loved one is here, how they can communicate with you, and to find out how you are doing. You might want to share this information with them or involve them in your treatment team meetings.

You decide whether OSH shares information about your hospital stay and your treatment with your family and friends. The hospital must get your permission before staff can:

- Confirm or deny you are a patient at OSH
- Tell your family and friends about your condition or your treatment

To get your permission, we will ask you to fill out a “Disclosure of Hospitalization” form and a “Release of Information (ROI)” form.

Please know...

Privacy begins with you, for your protection and to protect the rights of others. Please respect other people's privacy. Example: Give people space at the medication windows, and don't read other people's documents.

A “Disclosure of Hospitalization” form allows the hospital, if you so choose, to confirm you are a patient at OSH. You are required to fill it out, even to note that you don't want to release your information to anybody. If you don't fill it out, staff will note your choice in your medical record.

A “Release of Information (ROI)” form allows a specific person to receive information about your treatment and to talk to people on your treatment team. Filling out this form is optional.

Depending on how much information you want shared, you will need to fill out one or both of these forms for each family member or friend you want to receive information. Please talk to staff on your unit or your treatment team for more information. You can choose to withdraw this permission at any time, for any reason.

For more information about how your health information is shared, you can request a copy of OSH's Notice of Privacy Practices (OHA 2090) from unit staff.



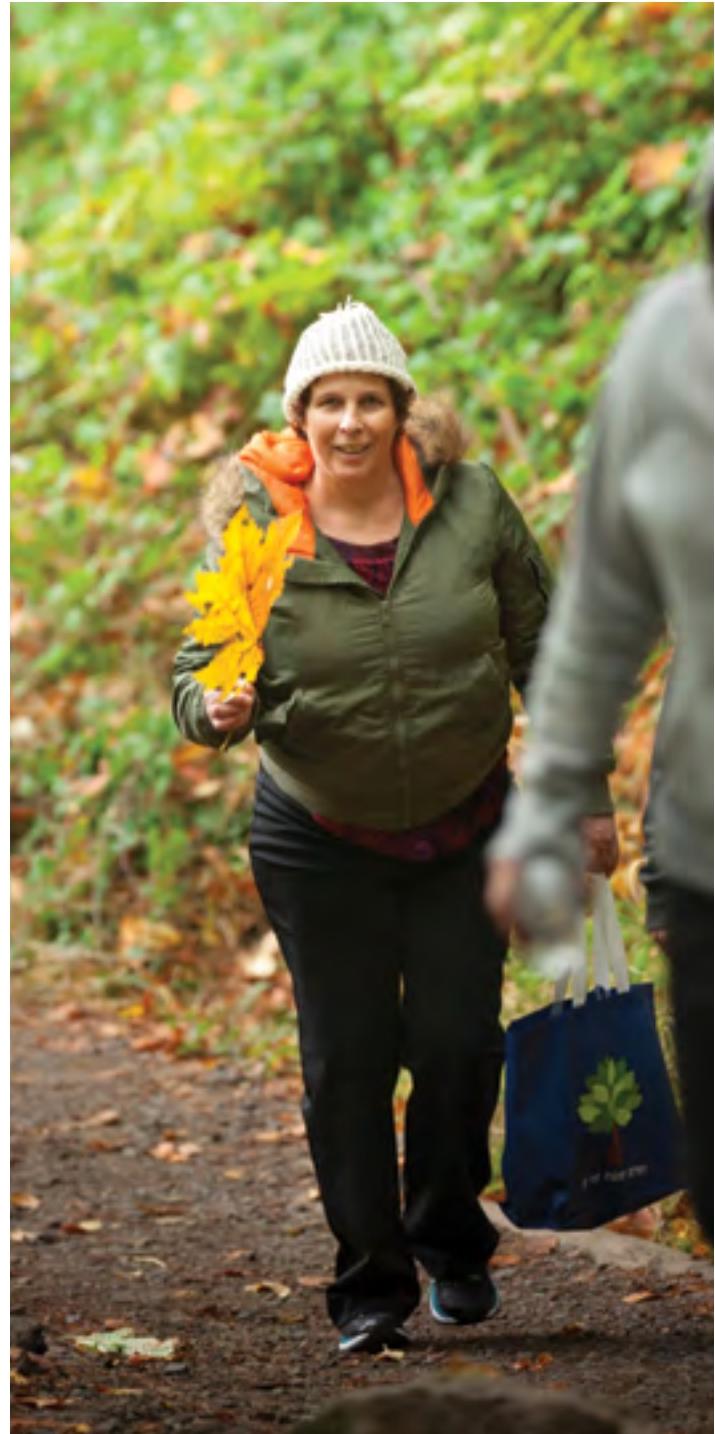
UNDER PSRB: TREATMENT

Who OSH serves

You were found Guilty Except for Insanity (GEI) for criminal behavior related to your mental illness and are under the jurisdiction of the Psychiatric Security Review Board (PSRB). The PSRB placed you in Oregon State Hospital to receive 24-hour care and supervision. See your program guide for more information on the PSRB.

The hospital also serves patients who were committed to the hospital for other reasons:

- **Civil** — People who have been found by the court to be a danger to themselves or others, or unable to provide for their own basic needs – such as health and safety – because of a mental illness
- ▶ **Voluntary by Guardian** — Working through the court system, legal guardians may admit their wards who meet civil commitment criteria as stated above.
- **Aid and Assist** — People who have been ordered to Oregon State Hospital by the courts under Oregon law (ORS 161.370) for treatment that will help them understand the criminal charges against them and to assist in their own defense



UNDER PSRB: TREATMENT

Treatment care plan

A treatment care plan is your roadmap to recovery. Please work closely with your treatment team to create your treatment plan and learn how to participate in your care. To be successful, it's important that you are engaged with your plan and make it your own.

Your treatment care plan includes the following:

What do I need to do to get out of here?

These are the smaller steps you need to take – like participate in treatment and therapeutic activities– to achieve your long-term goals.

What change would I like to see?

You and your treatment team should work together to identify goals you are working to achieve as you prepare to discharge from the hospital.

What am I working on right now?

Here, you can describe the barriers that prevent you from leaving the hospital. They may include things like managing your emotions in a safe way or addressing addictions. You could also include issues that affect your physical health, such as an injury.

How will my team help?

Staff can help you meet your goals. For example, if one of your goals is to earn your GED, staff will refer you to Supported Education to work on this goal.

What are my strengths?

These are the unique individual skills you have – including your abilities, interests and experiences – that you and your team can use to help you achieve your treatment goals.

You and your treatment team will review these areas at each of your treatment team meetings.

Your treatment care plan:

- After your admission, you will have regular meetings with your treatment team to work on your plan and update it during your hospital stay.
- If you would like, you may invite your family members and other people who support you to your treatment team meetings. Staff also may invite someone who is legally responsible for your care, such as a guardian.

Although staff are clinical experts of treatment, **you are the expert of you.** Successful treatment requires you take a lead role in your treatment. To be successful, you must help your team build a plan that works for you.

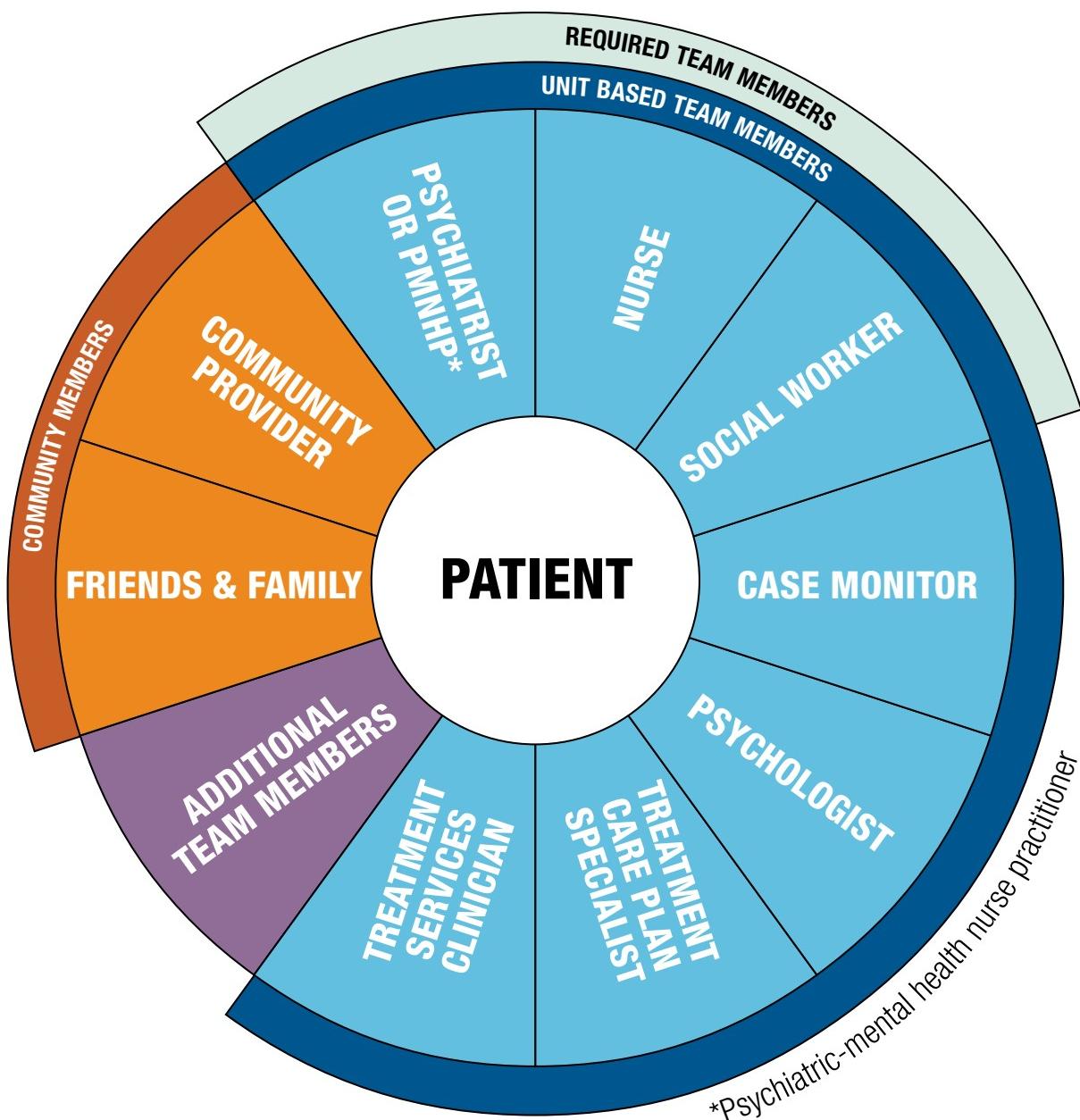
A member of your treatment team will let you know when your treatment team meetings are scheduled. If you or a key person in your group has a conflict, please discuss this with your treatment team before your next scheduled meeting.

UNDER PSRB: TREATMENT

Your treatment team

Your treatment team is a group of people who will work with you on your plan of care. This group includes you, OSH staff, your family members (if you so choose), and other people who support you. See the list below for more information about the members' roles.

You will meet with your team members regularly. Together, you will create and update your treatment care plan. Unit members work with you on a regular basis, and others will work with you as needed.



Treatment team continued

You

As the primary member of your team, you are encouraged to do the following. (The quoted examples are from patients):

- Share information to help your recovery.
"Share what gives you comfort or helps you to feel calm, such as books, drawing, being barefoot in the grass, etc."
- Participate in treatment care planning. This is your opportunity to share what services and supports most benefit you.
"Share what's important to you and what you expect, such as wanting to visit with your kids."
- Speak up if you don't understand something or have a concern about a care decision.
"Please speak up and ask for more information if your team informs you of a decision made without you, and you don't understand why."
- Ask questions so you can make decisions about your treatment and care options.
"If your treatment team offers only one treatment option, such as a specific medication or class, please ask what alternatives are available. What are the expected benefits, and what are possible side effects or drawbacks?"
- Ask staff to share information with you in a way you understand. Things to consider may include your learning style, culture, disabilities, reading/comprehension level, or language preference.
"If you learn better by hearing rather than reading, you can ask staff to read information to you."
- Invite people you want to be on your team.
"Choose people you trust, such as family members and friends."

Unit members

Psychiatrist or psychiatric mental health nurse practitioner (PMHNP) – (required team member)

This person diagnoses your condition, prescribes medications, and signs your treatment care plan. You will meet with this person regularly. If you want to meet more often, please talk to your psychiatrist/PMHNP about how to schedule additional appointments.

Mental health registered nurse (MHRN or RN) – (required team member)

There is at least one nurse available at all times on each unit, and one of them will be assigned to your treatment team. Another nurse may attend if your assigned nurse is not available. You can go to any nurse for any medical concern you have.

Clinical social worker – (required team member)

Your social worker conducts assessments and may provide individual or group treatment. This person also works with various community stakeholders to help you successfully move back to the community after you discharge from the hospital.

Your social worker will help you:

- Connect and advocate on your behalf with community partners, including county mental health and medical practitioners; and
- Act as the primary point person for family, community members and others about your progress while at the hospital.

Treatment team continued

Case Monitor

A licensed practical nurse (LPN) or a mental health therapist technician (MHTT) will work with you as your assigned case monitor. This is your primary “go-to” person who may help you:

- Make money withdrawals.
- Add or remove property from short- and long-term storage.
- Talk about your concerns.
- Retrieve mailed packages for you.

Please touch base with your case monitor regularly.

Note: There are no case monitors on the Junction City campus. Unit staff can help with these tasks.

Treatment care plan specialist (TCPS)

This person organizes, schedules and oversees your treatment care plan meetings and updates and maintains your treatment care plan, with your input. This person may also help coordinate treatment mall scheduling.

Psychologist

Psychologists perform mental health assessments and evaluations. They also provide therapy, which may be offered individually or in groups. If you want one-on-one time with your psychologist, please request it.

Treatment services clinician

Each treatment team has at least one of the following:

- Treatment services nurses share information with you about medication management, nutrition, and how your body functions. They help you develop skills to respond to stress and conflict, and they help you connect your goals to treatment groups. They also provide referrals for some specialty services.

- Occupational therapists help you participate in activities that are meaningful to you and that help you gain skills for community living. OTs can help you identify supports and coping strategies for transition, discharge planning and everyday life.

Note: If you are having significant challenges with a core member of your treatment team, please express your concerns fully so that your team may consider some options.

Additional treatment team members

You or your team members may ask other OSH staff who know you to join your treatment team. For example, if you are facing physical health care issues, these people may include members of the medical clinic on campus. They may become a permanent part of your team, or they may provide short-term assistance to help you focus on a particular area.

Behavioral health specialist

This person provides therapeutic engagement and group and individual therapy. This person may also assist in developing a plan to support you in building positive skills to replace behaviors that are less effective.

Spiritual care

Spiritual care providers support you with your spiritual or religious needs. Chaplains and Native providers are here for you in times of loss, grief, rebuilding relationships, and when you need to regain your spiritual well-being.

Peer recovery specialist

Peer recovery specialists have lived experience with trauma, mental health, and addiction challenges. They share their stories of hope to help you gain strength and empowerment on your journey toward wellness.

Treatment team continued

Vocational and educational services

These staff help you attend school or have a job while at OSH. They offer opportunities to help you further your education and gain job skills that will help you prepare for life outside the hospital.

Medical provider

Medical providers are doctors and nurses who work for the hospital and take care of your physical health needs. If you have a chronic medical condition or other concerns about your physical well-being, you may want to request your medical provider be a part of your team.

Physical therapist

Physical therapists help you improve your physical skills related to movement and pain management. They give recommendations and provide training for you and your caregiver.

Dietitian

Healthy eating can reduce the risk of diseases and is an important part of your overall well-being. Dietitians may work with you if you have cultural, spiritual or medically necessary dietary needs.

Your treatment team can coordinate requests to talk with a dietitian. Dietitians first schedule meetings with people who have the highest medical need.

Creative arts therapist

Art and music therapists use art and music materials and experiences to help with personal growth and emotional expression. You don't have to be an artist or a musician to participate.

Certified therapeutic recreation specialist (CTRS)

A CTRS will work with your skills, including your recreation and leisure interests, to help you achieve your treatment goals.

Community members

Friends, family and community members

You are welcome to ask friends, family and community members to participate in your treatment planning. Please work with your treatment team members to determine the extent of involvement for your friends, family and community support people.

To have these individuals attend your treatment team meetings in person, please add their names to your approved visitor list. You don't need to add their names to the list if they attend the meetings by teleconference.

These people can receive information about you and serve as peer advocates between meetings if you fill out an authorization and release information form. You decide who receives updates and what kind of information you want to share. Unless you have a legal guardian, you can revoke permission at any time.

Community provider

Community providers may include, but are not limited to, a community mental health provider, residential health provider, therapist, a member of your home-faith group, a sponsor, or a community-based peer support specialist.

UNDER PSRB: TREATMENT

Treatment mall

The treatment mall is where you go for classes and activities. By going to the treatment mall, you will participate in treatment to strengthen your skills and manage your life. You can use these skills while you are at the hospital and after you are discharged.

How to choose between groups?

Based on your interests and treatment goals, you and your treatment team will work together to decide which classes are the right fit for you. Examples vary by program and could include things like medication management, art therapy, substance use treatment and support, legal understanding, animal-assisted therapy, fitness and healthy cooking.

Most treatment malls are open for at least four hours a day, and treatment is provided by a variety of clinical experts.

If you are not yet ready to participate in treatment mall groups, but want to get oriented at the hospital, you are welcome to talk to a member of your treatment team about visiting your treatment mall. Some malls have an engagement center, which is a safe and welcoming place where you can go and staff will answer your questions.

Treatment malls are customized to offer all different levels of care to meet your specific needs.

Talk to members of your treatment mall staff for more information about the treatment mall's hours, classes and activities.

Other Activities

In addition to the treatment groups on the treatment malls, you will have the opportunity to participate in leisure activities of your choice. You may also meet and socialize with patients who live in other parts of the hospital.

Activities that take place on the mall during evenings and weekends are posted daily. For example, you may be able to visit the library, watch movies, listen to music, and play board games, ping pong or video games.

Talk to activity coordinators or unit staff for more information on after-hours or weekend programming.



UNDER PSRB: TREATMENT

Trauma-informed approaches to care

Oregon State Hospital promotes trauma-informed treatment and care.

Staff recognize that bad things happen to good people, and people can overcome the challenges they face.

What is trauma?

Trauma results from an **event** that is **observed or lived** by an individual as physically or emotionally harmful or life threatening. The event has lasting, adverse **effects** on a person's functioning and well-being.

Trauma is an injury that wounds the soul.

What can cause trauma?

- Childhood neglect or abandonment
- Chronic stress
- Wartime combat
- Discrimination
- Poverty
- Homelessness
- Hospitalization
- Physical, emotional or sexual abuse/assault

What does trauma look like?

- Feeling disconnected from others
- Not feeling at home in one's body
- Being unable to know what's safe and what's unsafe
- Being unable to imagine a better tomorrow
- Feeling bad, broken or unlovable
- Fear of loss
- Not being able to trust

What does untreated trauma lead to?

Untreated trauma leads to a lack of self worth, living in fear, depression, health issues and relational issues.

What can be done?

There is hope! People can and do heal from trauma with resilience and support.

You are enough! But, you don't have to go it alone.

What can I do if I need support?

Talk to someone. There are staff trained to provide trauma-specific support. You can start with a member of your treatment team. If there isn't someone on your team you feel comfortable sharing with, reach out to another staff.

It's important to know you are not alone.

You are valuable. There are people who care.

If you want to learn more about how past trauma may be affecting your life today, or learn strategies to cope with trauma, call or contact:

- Your treatment team
- Peer Recovery Services
 - ▶ 503-947-1098 in Salem
 - ▶ 541-870-3504 in Junction City

UNDER PSRB: TREATMENT

Collaborative Problem Solving

Oregon State Hospital uses Collaborative Problem Solving (CPS) as a treatment model. CPS is a treatment approach and system of care that's based on the belief that "people do well if they can."

If someone is not doing well, CPS states it's because they lack the skills necessary to respond effectively to specific challenging situations.

Everyone experiences situations that are challenging, and we all have different skills. Through CPS, we strive to identify those situations and skills, and we work together to create a more positive outcome.

Staff will work with you to solve problems you might be experiencing. During the process, they also want to help you develop skills to better face the same type of problem in the future.

They do this by:

- Involving you in your treatment.
- Helping you to pursue your goals and learn new skills.
- Listening to you and trying to understand your concerns.
- Asking for and using your solutions to address the problems you face.

Whenever possible, staff will work with you to come up with a solution that works for everyone involved.

For more information about CPS, talk to a CPS coach or other staff on your unit. At this time, not all units have CPS coaches.



UNDER PSRB: TREATMENT

Educational opportunities

Oregon State Hospital wants to help you achieve your educational goals, whether that's earning your GED, graduating from high school, taking college courses, or pursuing life-long learning.

Through the hospital's Supported Education Department, staff will help you identify the education program that matches your needs and interests. The type of school you attend depends on your age and commitment type.

By taking some of the offered classes, you will learn new skills that will help you find a job, meet your life goals, and start an education that you can continue when you leave the hospital.

Some of the classes offered include:

- Pre-GED and GED
- Reading/literacy
- Writing
- Science
- Social Studies
- Math
- English
- Foreign languages
- Computer skills
- College course work
- Goal setting, planning, time management

For more information, please talk to your Supported Education instructors.

Quest Adult School

Quest Adult School offers opportunities for 18- to 21-year-olds to continue their education while at the hospital.

Students can take placement testing, earn their high school diploma, or complete pre-college coursework. Coursework is tailored to fit individual needs in such areas as basic reading, math, vocational and job skills training, social skills, and developing new leisure interests.

The school is open five days a week, 224 days a year. For more information, contact a Quest Adult School teacher at 503-945-9981.



UNDER PSRB: TREATMENT

Employment opportunities

While at the hospital, you may request the opportunity to work. By having a job, you will learn skills to help you find a job after you leave the hospital and you will earn a paycheck. For example, vocational instructors can help you learn how to write a resume and answer questions during a job interview.

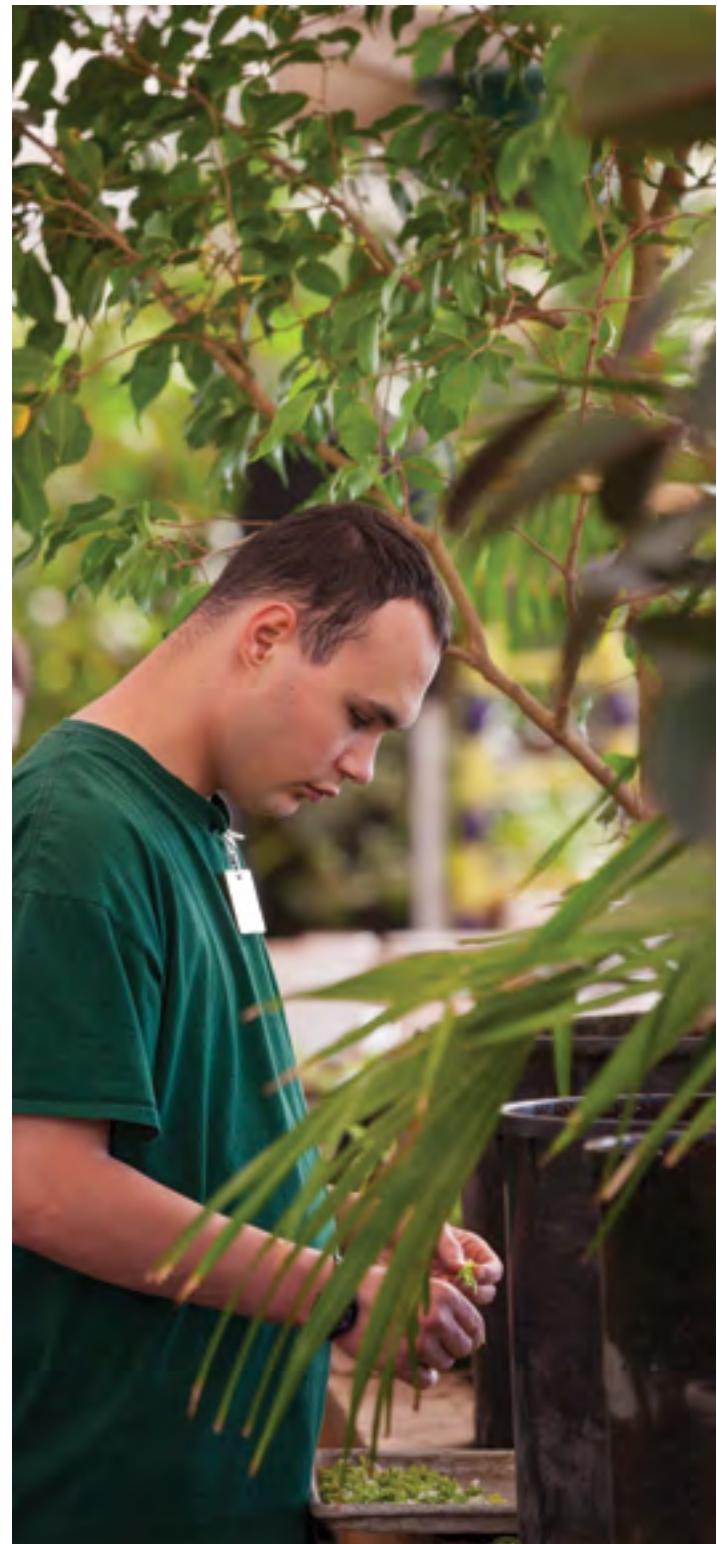
Most patients are able to apply for jobs. The Vocational Services Department regularly updates and posts a list of available positions in the units and other centralized areas. Patients are paid an hourly rate for most positions, including the following:

- Furniture maker in the wood shop
- Greenhouse attendant
- Janitor
- Kitchen worker
- Barista in the coffee shop
- Peer Recovery Services representative
- Sales associate in the market

To apply for any patient-pay job, you must first complete a vocational services application form – which your treatment team needs to review and approve. Vocational Services will contact you if you are selected for an interview, and they will let you know if you are chosen for the job.

In Salem, Vocational Services also offers bench-work opportunities, where patients are paid based on the number of items they make.

Please talk to your treatment team for more information.



UNDER PSRB: TREATMENT

REACH

REACH is short for Recovery Environments Actively Creating Hope.

Through REACH, you can earn points for taking part in your treatment. This could mean going to – and participating in – treatment mall groups, therapy sessions, treatment team meetings and other activities unique to you and your treatment plan.

Each program, **except for Bridges**, has a designated REACH store on its treatment mall, and each unit has a designated time to go there each week. **The schedule is posted on your unit, and REACH staff can share this information with you, as well.**

To visit your REACH store, a REACH behavioral health specialist will check for safety concerns over the past several days. If there are no issues – and no new issues on your scheduled REACH store time – you are eligible to go.

If there are safety concerns, and you are restricted to your unit, the REACH behavioral health specialist will work with your treatment team to create a modified plan. For example, you may be able to make a special appointment to go there with a staff member, or a staff member can visit on your behalf.

At the REACH store, you can spend points on things like:

- Clothing
- Snacks
- Books
- Games
- Stationery
- Hygiene products

Store items vary by treatment program and follow each program's prohibited items list. See your program guide for a list of items prohibited on your unit.

You can also make special orders at the REACH store with your treatment team's approval. To grant the special requests, REACH staff must receive emailed authorization from a member of your treatment team.

For more information, talk to members of your treatment team and consult your program guide.

Note: Treatment teams can request exceptions on a case-by-case basis.

UNDER PSRB: TREATMENT

Spiritual care and Native services

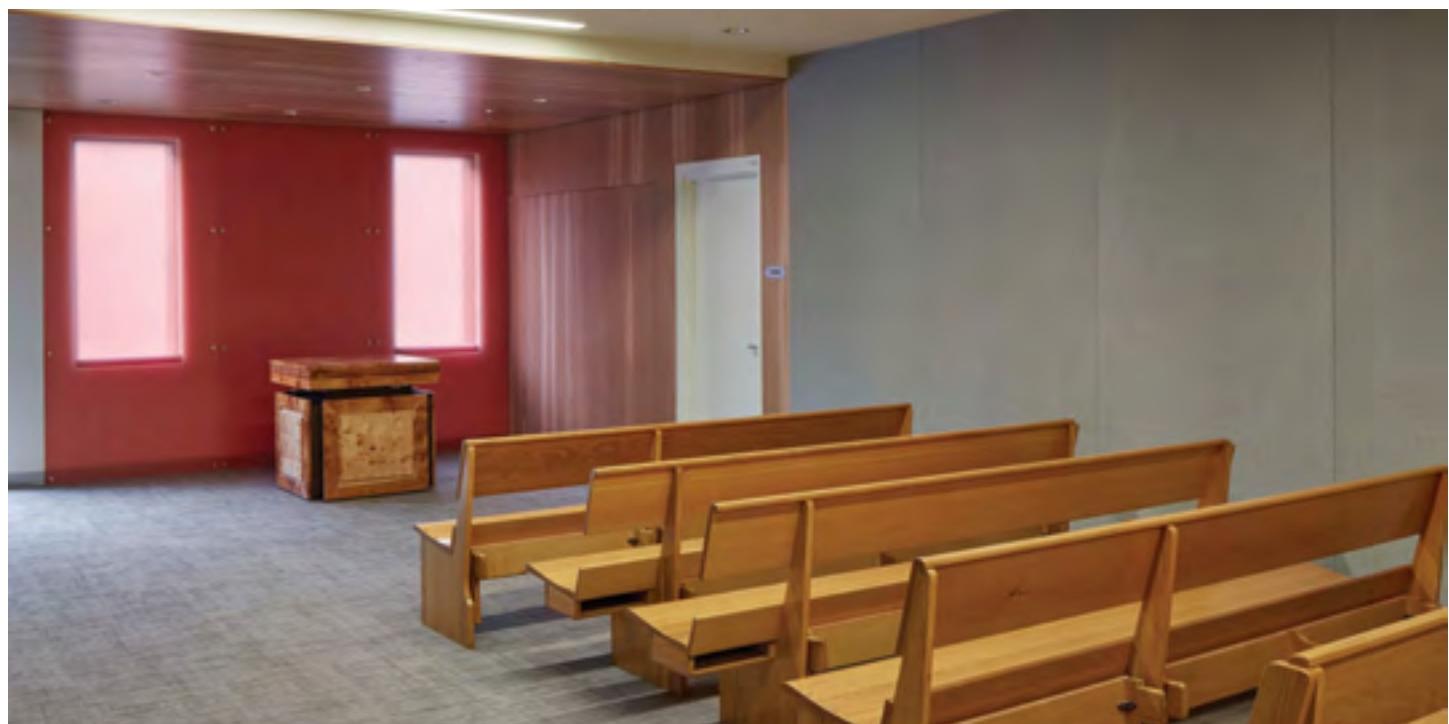
Spirituality is an important aspect of many patients' recovery. OSH supports all faith traditions through the Spiritual Care and Native Services Department. Chaplains and Native providers are here to support you, helping you draw upon your spirituality to find strength and hope.

When you are admitted to the hospital, a nurse will ask you whether you'd like a chaplain or Native services provider to visit you to discuss your spiritual needs. You may request a visit from a member of the department at any time by calling the department yourself at 503-945-2962 or by asking your unit staff to call for you.

The Spiritual Care and Native Services Department meets residents' religious and spiritual needs in many ways. Staff provide one-on-one visits for personal guidance, and they offer numerous spiritual groups – such as sweat lodges and smudges, Bible studies, mass, interfaith worship services, and other religious and spiritual practices and ceremonies. They lead spiritually based groups in the treatment mall, and they provide sacred texts for your faith tradition.

Spiritual Care can connect you with local faith leaders, if you want this assistance. You may also add visitors from your own faith community to your approved visitors list.

A list of scheduled ceremonies and worship services is posted in your unit. Feel free to request a chaplain or Native service visit at any time.



UNDER PSRB: TREATMENT

Recreation, leisure and fitness

Treatment Services staff offer a wide range of activities in which you can participate. Through these activities, we hope you'll make friends, develop new interests, and learn how to relieve stress. You can find daily activity lists posted on your unit. Activities often include:

- Arts and crafts
- Music
- Basketball
- Off-campus outings (depending on commitment type, privileges granted, and approval from your treatment team)
- Fitness classes
- Movies
- Board and card games
- Peer Advisory Council
- Support groups

Staff also organize special events for patients. For example, you could watch a musical production, sing in a holiday pageant, or share your poetry or comedy routine during a monthly open mic performance.

If you have ideas for any new unit activities, or if you want information on upcoming events, please connect with any staff member on your unit. If you have ideas for bigger activities that would involve multiple units or programs, contact your mall manager.



UNDER PSRB: TREATMENT

Risk review

Risk Review is a group of OSH staff responsible for:

- Approving or denying privileges requested by patients' treatment teams (see the Privileges and Outings section below)
- Making recommendations, such as for jurisdictional discharges and appropriate community residential placements

How does this process work?

- Based upon the progress you make during treatment, you and your treatment team will work together to decide when to request a Risk Review meeting.
- Your team will submit a Risk Review request to schedule a meeting.
- During the meeting, Risk Review will discuss your treatment and other relevant factors with you and your treatment team.
- Risk Review will decide whether to approve the privilege requests. It will consider your history of risk behavior, the crime for which you pleaded guilty except for insanity, how well you participate in your treatment, and your plans for keeping yourself and others safe.

If you show unsafe behavior, stop participating in treatment mall classes, or if your treatment team has concerns about you using your privileges safely, your treatment team can suspend your privileges.

Privileges/Ratios

Privileges refer to whether you may participate in activities on hospital property (on grounds) or take part in activities off hospital property (off grounds). Some privileges also refer to the number of staff who must be with you and other patients. When you have more privileges, you will have fewer staff escorts.

Below are ratios that show privilege levels based on the number of staff needed for each patient during an outing. For example, 1:1 means there must be one staff member for every one patient; 2:8 means two staff members for every eight patients, etc.

- | | |
|--|--|
| <ul style="list-style-type: none"> • 2:1, on grounds • 1:1, on grounds • 2:4, on grounds • 2:8, on grounds | <ul style="list-style-type: none"> • 2:1, off grounds • 1:1, off grounds • 2:4, off grounds • 2:8, off grounds |
|--|--|

Here are some terms about privileges you might hear and what they mean:

- Solo for work – You may get to walk to and from your work site on your own.
- Authorized person(s), on and off grounds – A family member, friend or other important person in your life will supervise you. No OSH staff will be present.
- Conditional Release Ready status – When you reach this privilege level, your social worker will send your information to prospective conditional-residential programs, like group homes.

Risk review continued

- Community mental health provider, off grounds – OSH staff may take you to meet with community providers, who will supervise you during your visit. You'll usually be approved for this privilege if you are also approved for Conditional Release Ready status.

Some people start with small privileges – such as going on walks outside the secure perimeter – while others may receive privileges at a faster rate. Risk Review determines which privileges are right for you based on your specific treatment needs.

For more information about Risk Review and privileges, please talk with members of your treatment team.

UNDER PSRB: TREATMENT

Outings

By staying safe and participating in treatment mall activities, you may earn the privilege to go outside the hospital on "outings." Outings may include such things as a trip to the grocery store, park or movie theater.

Outings help you practice the skills you will need when you are released from the hospital, such as how to budget for something you want to buy.

Here are some key things to know about outings:

- Even if you are scheduled for an outing, staff will always check to make sure you are safe to participate on the day of the outing. Before you leave, a nurse will assess you and decide on final approval for you to participate.
- If there aren't enough staff on the day of the outing, the outing may be rescheduled for another time.

- During your outing, you must follow staff directions and stay within sight and hearing distance of staff.
- If you want someone from outside the hospital to join you, please work with your treatment team ahead of time to make arrangements. Once you do, the team will help you plan for the outing.

Please note: Depending on your program, unit staff may search your belongings when you return from an outing. This is to ensure you don't return with items that could be used to hurt you or someone else. You may also be asked to take a drug test.

For more information about outings, please talk with members of your treatment team.

UNDER PSRB: TREATMENT

Getting out of the hospital

Your treatment team helps to determine when you are ready to leave the hospital. However, the Psychiatric Security Review Board (PSRB) ultimately approves the conditional release at a hearing. The board looks at many factors, including your participation in treatment, your ability to stay safe, community safety and victim impact statements.

You will remain under the jurisdiction of the PSRB until the end of your jurisdiction or until the board finds you no longer meet criteria for jurisdiction.

While under its jurisdiction, PSRB decides when you get out of the hospital. This is called “conditional release.” The PSRB also defines the terms of your release through a conditional release plan. This plan could include such requirements as staying sober or attending support group meetings. If you break the terms of your conditional release, you may have to return to the hospital. This is called a “revocation.”

Listed below are steps for you to take to leave the hospital, as well as information about how staff can help you.

Treatment team participation

Your first step in your recovery is to participate in individual and group counseling. These treatments are designed to help you communicate well with others, manage your emotions, solve problems and meet your personal goals.

You will work with your treatment team to find the treatments that are right for you. By engaging in this process, you may:

- Better understand your mental illness;
- Learn ways to cope with symptoms of your illness;
- Understand how medications may help your mental and emotional wellness;
- Develop healthy relationships with other people who can help you;
- Learn how your behaviors affect others; and
- Develop increased understanding and awareness about how your past actions may have harmed others.

Risk assessments

You may work with a psychologist to do a violence risk assessment (VRA). This assessment will help you and your treatment team learn about your personal risk factors and ways to support you during your recovery. You may also complete risk assessments in specific areas, such as fire setting, sexual concerns or stalking behaviors – if they apply to you. Please know that not all patients get a violence risk assessment.

Getting out of the hospital continued

Risk Review

When you and your treatment team feel you no longer need hospital level of care and are ready to live in the community, you will meet with Risk Review to request approval to start planning for your conditional release from the hospital.

Risk Review will look at many factors, from your participation in treatment to your ability to stay safe while on community outings. You need Risk Review's approval to go before the PSRB to ask for a conditional release.

From the hospital, most patients move to a group home in Oregon, where they continue to receive treatment for their mental illnesses.

Please see the earlier section on Risk Review in your handbook for more information.

Conditional release planning

To plan for conditional release, your social worker will refer you to a community placement that best fits with your treatment and personal needs. This is usually a secure residential treatment facility or a group home.

You'll have the opportunity to meet and interview with facility staff and county evaluators, who make evaluation decisions. Your treatment team and your social worker will support you throughout this process.

When you are accepted to a placement, your treatment team will request a PSRB hearing for conditional release. PSRB may approve or deny your conditional release to your placement.

PSRB hearing

If PSRB approves your conditional release, you may be able to move to the facility immediately after the hearing – if there is an immediate opening. Sometimes, you may have to wait for the facility to have a vacancy.

Before you are released from the hospital, benefit coordinators will work with you to ensure your Social Security and disability health care benefits are in place.

For more information about getting out of the hospital, please talk to members of your treatment team.



UNDER PSRB: GENERAL INFO

Visitation

How can my family and friends visit me?

Family and friends can play an important role in your recovery, and staff want you to have every opportunity to visit with them.

For your loved ones to visit, they will need to fill out a visitor application – which does include a background check. Staff make every effort to process applications as quickly as possible, but it can often take several days to finish the process. OSH will only approve visitors after first receiving approval from you and someone on your treatment team.

Copies of the visitor application are available:

1. In person, at Reception
2. By calling Reception and asking for staff to mail a copy to them
3. Salem: 503-945-2800 or 800-544-7078
4. Junction City: 541-465-2554 or 877-851-7330
5. By visiting oshfriends.com

Please note that there are separate visitation forms for adults and children.

If you or your friends and family have questions about visitation, please talk to the staff on your unit or call Consumer and Family Services at 503-947-8109 (Salem) or 541-465-2785 (Junction City).

Food during visits:

If you want to enjoy food during your time together, the hospital has guidelines everyone must follow. Your program may have additional guidelines to the ones listed below:

1. When they meet with you, visitors may bring food and drinks in factory-sealed containers that don't contain alcohol or cannabis.
2. Containers may not be glass, metal or aluminum.
3. Food and drinks may not be homemade or from a restaurant.
4. Food must be from a store and in its original, sealed packaging.

See your program guide for additional rules.



Visitation continued

Special family visits:

Special occasions call for a special meal with family. The family dining rooms on the Salem and Junction City campuses provide a more private setting to celebrate a birthday, anniversary, holiday or other memorable occasion with loved ones while enjoying a memorable meal, prepared (for a fee) by the hospital.

For more information, or to reserve the family dining room in either Salem or Junction City, contact Consumer and Family Services at 503-947-8109 (Salem) or 541-465-2785 (Junction City).

Note: For safety reasons, patients in the Harbors Program do not have access to the family dining room.

Gifts and other items during visits

Friends and loved ones may bring items for you when they visit. They need to give these items to Reception staff when they check in so Security can scan the items to ensure they are allowed. Hospital staff will then deliver the approved items to you on your unit and add them to your property list, if needed.

Note: Some items, like food, are not added to your property list.

Visitors can leave money to be deposited into your patient trust account with reception. Please see the Patient Funds section for more information.

Note: For Junction City-specific information, see the Junction City Program Guide.

Visitation schedule:

Regular visiting hours vary by program and building. Please refer to your program guide for information specific to your program.



UNDER PSRB: GENERAL INFO

Meals

Oregon State Hospital provides all patients with three meals and an evening snack each day.

Each unit has assigned times for meals served in the dining rooms. Everyone is encouraged to go to the dining room for meals. On your unit, snacks are usually served around 8 p.m. – although there is some flexibility with the schedule.

Food Services plans meals that are healthy and nutritious. You will have several choices at each mealtime. If you choose not to go to the dining room for meals, Food Services will provide you with a to-go meal.

Food Services can make accommodations for medical needs, food allergies, food sensitivities and cultural and spiritual needs. If you have any nutritional concerns, dietary preferences, or needs that you did not tell the nurse during your admission, please let your treatment team know. You may need to follow up with your requests.

Your treatment team can coordinate all requests to talk with a dietitian. Dietitians first schedule meetings with people who have the highest medical need.



UNDER PSRB: GENERAL INFO

Market, café and coffee shop

Your ability to visit the market, café and coffee shop depends upon your program, staffing levels and the privileges and restrictions set by your treatment team. For more information, see your program guide or talk to a member of your treatment team.

Market

The market is where you can buy your own snacks and supplies, like headphones, shampoo, deodorant, soap and makeup. It's open during the late afternoons and evenings. The hospital gives you food, clothing and personal hygiene products, and the market carries more kinds of items from which you can choose.

Each program has different limits on the amount of money you can spend on each visit. See your program guide to learn about these limits and the amount of cash you can carry with you at any given time.

Café

You may have access to the café during visiting hours and per your unit's schedule, but the times may be limited. If available, the café can be the perfect spot to share a meal while you chat with visiting friends and family. The cafeteria-style restaurant is generally open for breakfast, lunch and dinner. Food available for purchase includes burgers and fries, sandwiches, soups, salads, desserts and more.

Coffee Shop

The Valley/Kirkbride coffee shops offer a wide variety of hot and cold beverages, pastries and other snacks.



UNDER PSRB: GENERAL INFO

Your room

Your room may be a single or a double, which means you might have a roommate. You can decorate your own space in your own way, within safety guidelines.

To keep your living space calm and safe, the following rules are in place:

- You may place pictures and other items on the bulletin board in your room.
- To prevent the spread of infections, you can neither store items on the floor nor stack them on top of each other. Exceptions include personal laundry baskets and waste paper baskets.

For health and safety reasons, you are responsible for storing personal items neatly in your room and for keeping your room tidy. Housekeeping staff will sweep, empty the trash, and mop your room three to five times per week. Staff will also check your room weekly for clutter, fire-safety issues, and to make sure you do not have property that could be unsafe or harmful.

Each program has unique guidelines around what you may or may not have in your room. For more information, see the section about personal property in your program guide or talk to any staff member on your unit.



UNDER PSRB: GENERAL INFO

Personal property

You can help keep your property safe and secure by listing all your personal items on a property form. Staff go through your belongings with you, inventory each item, and note them on your property sheet.

Please include detailed descriptions (color, brand, size, value, etc.) of your property, and make sure to review your sheet every time you change units. This will help you get reimbursed in case your property is lost or damaged. If this happens, talk to staff.

Your small property – such as keys, credit cards, checks, driver's licenses and other forms of identification – are kept off the unit in a safe location. Staff can retrieve these items for you, as needed.

If your items don't fit in your unit's property room, we will put them in long-term storage, assist you with shipping, or help you make arrangements with someone you trust to pick up and store your property for you. Access to items in long-term storage is limited.

For more information, talk to your case monitor or other staff. Additional information is also in your program guide.

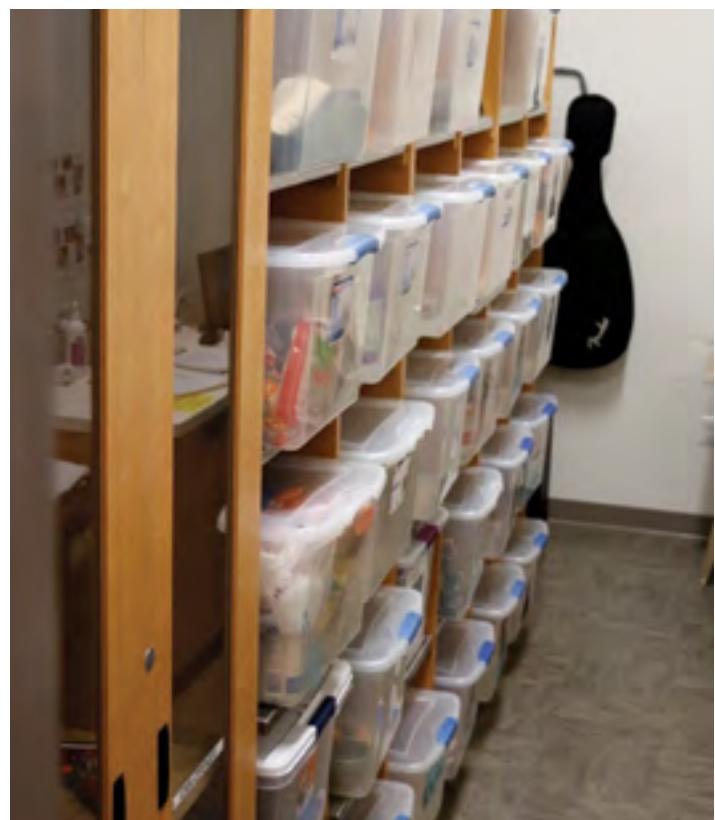
New property

When you want to get new things, you will need to fill out a package request form. This form identifies what you expect to receive, including items you get as gifts, order online, or purchase in the community while on outings. Staff will assist you when you receive something new to add it to your property form.

It's a good idea to talk with staff to make sure the items are allowed on your program unit. Depending on your legal status and program, the list of prohibited items will differ. Staff can give you a list of these items. If you are not sure about an item, please ask your treatment team.

There are also many items that are prohibited – unless you have approval from your treatment team and a safety plan is in place. If there is something you want – especially if it's therapeutic in nature – bring the issue up with your treatment team to discuss further.

Note: Patients on the Junction City campus don't use package request forms.



UNDER PSRB: GENERAL INFO

Clothing

For safety reasons, there are certain guidelines about clothing. These guidelines are based upon where you are staying in the hospital. Please see the contraband and prohibited items policy for more information. Clothing that does not follow our guidelines can be stored for you or sent to a friend or family member.

Family and friends may send you clothing, and, depending upon your program, you may buy your own clothes. The hospital will give you clothing if you need it.

Clothing must fit in designated storage areas – such as closets, cupboards and storage bins.

See your program guide for more information.



UNDER PSRB: GENERAL INFO

Clothing store

If you are in need of clothing, the hospital will provide you with items from its clothing store. Both the Junction City and Salem campuses have clothing stores.

Every patient is allowed to have the following:

- Seven pairs of socks
- Seven sets of underwear
- Three bras
- One pair of shoes
- Five shirts
- Five pairs of pants
- Two sweaters or sweatshirts
- Two coats

These items are **free** to patients. Staff can order clothing items for you from the store, and, depending on your program and privilege level, you may visit the clothing store with unit staff during open hours.

The clothing store offers a wide variety of clothing. Some items are used, and some items are new. The shop receives donated items from outside the hospital to help support patients in their recovery. The donated items can be anything from name-brand jeans to basic T-shirts and shoes.

Both campuses have seamstresses who work in the clothing store. They can hem pants, repair zippers and mend favorite shirts or jeans. They have a lot of work, so repairs and alterations can take a few weeks.

Returning clothes

If clothing you receive from the store doesn't fit, you may give it to unit staff to return for you.

Donating clothes

If you no longer want items you purchased or brought with you to the hospital, the hospital will donate them to a community organization. Depending on your program, staff can submit a work order to have the warehouse donate the items, or you can take items to an off-campus donation center.



UNDER PSRB: GENERAL INFO

Laundry

During your stay, the hospital will provide you with clean bed linens, blankets and towels. Each unit has a supply time, when you will bring back your dirty linens and towels and get clean ones.

You are responsible for washing and drying your own clothes. Please put your dirty clothes in the hamper we provide for you. If you do not feel well, staff will assist you with your laundry.

The laundry area has washers, dryers, dryer sheets and detergent you can use. Staff will be with you and can help if you have questions. The laundry room might not be open during treatment mall hours.



UNDER PSRB: GENERAL INFO

Interpersonal relationships

The human need for contact, warmth, affection and support is universal. However, Oregon State Hospital is responsible for ensuring that touching between you and your peers – which includes all physical contact – is respectful, has clear, mutual consent and is not sexual.

Expressing support through physical touch

Non-sexual physical contact between people can provide support and express friendship; it can also cause distress, make people uncomfortable, or activate a trauma response. A trauma response means people have a strong reaction to a situation that reminds them of painful experiences.

- Before you touch someone, you must ask the other person. That person must clearly give consent.
- Consent can be withdrawn at any time – what was OK an hour ago may not be OK now.
- Your staff and your peers may direct you to stop any touching that is not wanted by the other person or that is inappropriate for the situation or the person's treatment needs.
- For your success in the hospital and the community, it's very important for you to learn about consent and acceptable types of non-sexual physical touching. This can change, depending on where you are and the people you are with. Please be open to having these conversations.
- Ask for consent. Confirm consent. Respect what people tell you.

Sexual contact and expression

Sexual expression and sexual intimacy are universal needs, too. However, sexual contact and behaviors may be unwanted. The hospital is responsible for protecting you and your peers from harm or hardship, both emotional and physical, that can be caused by sexual contact or behavior, including:

- Disease transmission (which can be life threatening).
- Physical, emotional and psychological trauma.
- Pregnancy and the resulting emotional and physical risks.

To support and protect you and your peers, we ask that you don't participate in any sexual or intimate behaviors, including:

- Intimate touching, sexual contact and sexual activity.
- Kissing.
- Extended hand holding (rather than brief emotional support).
- Lingering (longer than usual or expected for the situation), full-body hugs or from-behind hugs.
- Sexual conversations and statements (This does not include discussions as part of treatment/education about healthy sexual development or relationships).
- Going off alone with another patient to be more intimate.
- Other behaviors you would normally associate with sexual interactions or relationships.

If you have concerns about managing your sexual health needs while at OSH, please talk to a trusted staff member.

UNDER PSRB: GENERAL INFO

Taking care of yourself

Oregon State Hospital staff are here to help you take care of yourself. Below are some things that can help your overall wellness.

Health and wellness

To keep you, staff and visitors healthy, we ask that you talk to your unit nurse if you are feeling unwell or suspect you may have a contagious illness. Staff will make sure you see a medical provider, if needed.

To prevent the spread of seasonal flu, you are encouraged to get an annual flu shot here at the hospital. Staff will offer you this opportunity during flu season.

Occasionally, there may be times when several patients on a unit have a contagious illness. When this happens, the hospital may have to “close” a unit to prevent the illness from spreading. This means all patients on the unit will have to stay there until the sick patients are no longer contagious. Even well patients can spread a contagious illness by being around others who are sick.

The best way to prevent getting sick is by washing your hands frequently. Coughing into a tissue or your elbow also prevents germs from spreading to others.

Sleep

Regular sleep is important for your well-being and recovery. Please reach out to staff if you are having trouble sleeping.

Staff members will check on you with a flashlight at least once per hour for safety reasons. When you are sleeping, staff will try to be as quiet as possible. Although this may be disruptive, it is important for staff to see you when they stop by your room.

If you have special needs to help you sleep and feel safe – such as listening to music on headphones or using a night light – talk with your treatment team. They will try to help.

Personal hygiene

Washing your hands, brushing your teeth, and keeping your hair and body clean and neat helps you, and everyone else at the hospital, stay healthy. Staff ask that you bathe on a regular basis. If needed, staff will work with you to find different ways to help you stay clean.

Staff will supply basic hygiene products such as soap and shampoo. If permitted by your program, you can purchase different brands, and other items – like conditioner – through the REACH store and the market.

Shaving

The rules on using safety razors, and the supervision required, vary by program. If you want to shave, talk to staff on your unit. More information is available in your program guide.

For more ideas about ways to take care of yourself, talk to members of your treatment team.

Taking care of yourself continued

Haircuts

You may be able to get a haircut in our hair salon. In some cases, hair stylists can dye or perm your hair. You will have to purchase the materials with your own money or through the REACH store. Please talk with your unit nursing staff to learn how to make an appointment to get a haircut.

Sexual health

You can discuss how to manage your sexual health needs at the hospital with your treatment team. OSH permits certain items you may need for personal use, such as sex toys. If you wish to use any devices, lubricants, condoms, etc. to better meet your needs, please talk to a member of your treatment team.

UNDER PSRB: GENERAL INFO

Identification

It's important for you to wear your identification (ID) badge when you are off your unit and on hospital grounds. Everyone on campus is required to wear a badge. There are different colors of badges for staff, patients, visitors and contractors.

Please wear your badge above your waist so staff can see it. If you lose or damage your badge, please tell unit staff so they can get you a temporary ID badge. If there is a big change in how you look – such as if you grew a beard – staff may ask you to have a new photo taken for your ID.



Even therapy dogs wear identification badges at OSH

UNDER PSRB: GENERAL INFO

Phone calls, stamps and mail

You have the right to stay in touch with loved ones outside the hospital through phone calls and mail.

You can buy envelopes and stamps at the REACH store with REACH points and at the market, which accepts cash.

You can also make calls anywhere in the United States and Puerto Rico for free.

Phone calls

Phones are available on each unit for you to use, which will allow you to make free, national calls. Please be considerate when using the phones by:

- Respecting other people's privacy by not listening to their conversations.
- Limiting the length of your calls to give everyone a chance to use the phone.
- Taking messages for one another.
- More information on phone rules for your unit are listed in your program guide.

To make an international call, you can buy an international calling card. Talk to staff for more information.

Mail

You have the right to send and receive sealed letters, and you can buy stamps if you have money. Except for legal mail, staff will ask you to open your mail in front of them.

If you cannot afford stamps, envelopes and stationery, the hospital will provide you with enough to send up to three letters per week.

Staff will provide you with additional supplies to communicate with your attorney. Once you complete the full address on a letter, you may give it to a staff member to send for you. Be sure to also include your name on the envelope in case the mail is returned.

Receiving packages

- You are able to receive packages, which security staff will screen for safety.

Sending packages

- Meet with your unit staff to prepare your package.
- Remove the items from your inventory and update your itemized, personal property list.
- Seal your package for delivery.
- Staff will bring your package to Reception to determine the postage needed.
- Complete a money-withdrawal request form to pay for the postage. Requests must be signed and approved by staff.
- Once you complete these steps, staff will mail your package for you.
- Be sure to include your name and unit on the packages, in case they're returned.

For more information on the items you can have with you on your unit, see the Contraband and Prohibited Items section in your program guide or talk to staff on your unit.

UNDER PSRB: GENERAL INFO

Law library

You have a legal right to access legal materials a minimum of four hours per month. The law library is where you can find legal information and resources, including printed reference materials and an online legal database. On the Salem campus, the library is next to the patient library between Trails and Harbors. In Junction City, it's in the patient library on the first floor of the treatment mall.

Law clerks and paralegals from a local law firm hold regular onsite hours at the law library to offer additional assistance to patients. **You can find the schedule for their hours posted in the law library and on your unit.**

Each unit has a scheduled time for patients to visit the law library. If you would like to use the law library, please talk to the staff on your unit to sign up. In most cases, you may use the law library on a “first-come, first-served” basis during your unit’s scheduled time. Patients with a pending court deadline are given priority.

If you choose not to attend during your unit’s scheduled time, you may need to wait until your unit’s next scheduled time. Please note that the day or time your unit is scheduled to use the law library may change due to staffing availability. Staff will reschedule missed times.

If you are denied law library access for any reason, staff must document the denial in your medical record and on the unit sign-up sheet. They must list a reason and sign the sheet.

If you need help signing up to use the law library, or if you have other questions, please check with staff or the nurse manager on your unit.

If you feel you aren’t getting enough access to the library, please call Consumer and Family Services:

- **Salem:** 503-947-8109 or
- **Junction City:** 541-465-2785



UNDER PSRB: GENERAL INFO

Unit community meetings

Most units hold community meetings at least once a week. At the meetings, patients and staff discuss upcoming events and activities.

Community meetings also give patients and staff time to share their issues and concerns and their

ideas for addressing them. You are welcome to attend and participate. Ask your unit staff to find out when your unit's community meeting takes place.

UNDER PSRB: GENERAL INFO

Patient funds

Rules about money vary in each program. If your program allows you to have cash, you may have **up to \$30** with you at any time.

If you receive money from disability, Social Security, pensions, etc., you can keep it in a hospital trust account, a bank, or with a trusted family member or friend. You, your guardian, your payee, or any other person who makes financial decisions for you must decide what to do with that money.

Below are some common questions and answers about patient trust accounts. Please see your program guide for more information.

Am I required to have a trust account?

If you choose to keep your money with the hospital, you need to fill out a trust account application. A trust account acts like a bank account within the hospital. It helps keep your money safe and will allow you to keep track of deposits and withdrawals. Please see the trust account application for additional information about this process. Your unit staff can get an application for you.

If you have a patient-pay position on campus, you are required to have a trust account. If you don't complete the necessary paperwork, you will have access to your funds when you sign the application or when you discharge from the hospital – whichever comes first.

When can I withdraw money from my trust account?

There are set days for each unit to submit trust account withdrawal requests. You can talk to unit staff to find out the schedule for your unit. Depending on your program, it may take up to five days before you have access to your funds. Please talk to staff on your unit for more information on how and when you'll receive your money.

How often can I withdraw funds from my account?

The number of times you can withdraw from your account varies by program. With the exception of the Harbors Program, you can have up to \$30 in cash with you at one time. If you have the privilege

Patient funds continued

to go on an outing, and if a nurse manager – and/or program director – approves your request, you can have more than \$30 to make a purchase while on your outing. Withdrawal forms are available on the units and can be turned in to any staff member.

Can my friends and family give me money?

Visitors may not give cash directly to a patient. Visitors can leave cash, checks or money orders to be deposited into your trust account with Reception staff. Reception will give visitors a receipt to verify the exchange. To ensure you have quick access to your funds, please let unit staff know ahead of time if you'll have money to deposit into your account. If you do not have a trust account, staff can help you open one. Your funds, other than your \$30 cash limit, will be on hold until you sign the trust account application, you discharge, or you make arrangements to have your money deposited somewhere other than an OSH trust account – such as a bank, guardian, conservator or family member.

Can I transfer money from my trust account into another patient's trust account?

Yes, as long as the transfer is first approved by your treatment team and then by your program director. To make the transfer, please fill out the "Consent to Withdraw Funds" form, which staff members on your unit can provide.

Can I buy something from another patient?

No, with the exception of Bridges, Pathways and Junction City (pending approval from both patients' treatment teams). Cash exchanges between patients are prohibited.

Do nurse managers or program directors have to approve my withdrawal requests?

Depending upon the dollar amount, different rules apply. Please see your program guide for more information.

- Anything \$30 or less does not require approval (unless you make a check request).
- For \$30.01 or more, additional approval may be needed.
- All check requests require some sort of approval. The dollar amounts listed above apply for checks as well.

Financial Services will process a withdrawal request the first weekday after receiving it.

How can I get a money order?

The Accounting and Banking office does not issue money orders. Withdrawals from patient accounts are either in the form of cash or check. If you need a money order, you would have to request a cash withdraw from your trust banking account and then request a staff member purchase a money order for you.

Where can I get more information?

More information about patient funds is found in OSH policy 4.010, "Handling of Patients' Funds." You can request to review a copy of the policy by talking to nursing staff. If you have any questions about the policy, please contact unit staff or see your program guide.

For questions about patient trust accounts, you may also call 503-947-1075.

UNDER PSRB: GENERAL INFO

Paying for your care

Oregon law requires the hospital to bill you for the services you receive here.

OSH will bill you for your daily room and board, medications, individual and group therapies, and the one-on-one care you receive from the medical clinic, psychiatrists, social workers, nurses and others. You will be charged for what you can afford to pay.

The hospital will determine how much you owe based on what you can afford.

Patient Financial Services has a team of patient account coordinators who gather information about your income and expenses. They use this information to determine how much of your bill you are able to pay.

Most patients qualify for a sliding-fee scale, which is based on current Federal Poverty Level guidelines. This means that patients with more assets and income pay more and patients with less income pay less.

The hospital bills medical insurance first – whether that's Medicare, Medicaid or a commercial insurance carrier like Blue Cross Blue Shield or MODA. You may only have a co-pay or deductible to pay. If you have enough financial resources, you may be responsible for your entire bill or everything your medical insurance does not cover.

In the event you need money for other special needs – such as dental work, clothes or eyeglasses – the hospital will determine if you are eligible for additional financial assistance.

Please know that if you are unable to pay for your cost of care, the hospital will not send your balance to a collection agency or reports to a credit bureau.

Patient account coordinators will instead work with you to discuss your options. They may be able to issue a hardship waiver or reassess your ability to pay if your financial situation changes.

Patient account coordinators are available Monday-Friday, 7 a.m. to 4 p.m. to answer your billing questions. You can call 503-945-0244.

The voice mail box is checked daily, and all calls are returned within 24 hours or by the next available business day.



UNDER PSRB: GENERAL INFO**Personal searches**

To ensure the safety of yourself and others, staff may ask you to submit to personal searches to make sure you don't have any items that could be used to hurt yourself or others.

Staff might use a "wand" metal detector or conduct a security check. Security checks may include having you turn out your pockets and remove your shoes. Staff are trained to use a trauma-informed approach when conducting searches.

If you have concerns or questions about personal searches, please talk with a member of your treatment team.

**UNDER PSRB: GENERAL INFO****Personal property and room searches**

Property and room searches may occur at any time if staff have safety concerns. You have the right to be present during property searches, which staff should perform in a respectful and thoughtful manner.

With each type of search, staff will remove items that pose a danger to yourself or someone else. This includes items that are on the "contraband and prohibited items" list for your program.



UNDER PSRB: GENERAL INFO

Patient forms

Unit staff members can help you get any form you need and help you complete it. Some forms are also available in folders on your unit. The folders are in the open area near the nursing office. Staff can provide general information about each form, although the submission process may vary across the units.

Below is some information about the most commonly requested patient forms:

Authorization and Consent for Use of Information/Photographs/Audio and Visual

This form is often called an A/V form or photo release form. By signing it, you give consent to a person or organization to take your photo, interview you, or take video of you. For example, OSH staff may ask your permission, and have you fill out this form, to take your photo during a hospital event or activity in which you are involved. This form is not required when staff take your hospital ID photo; it is required if you want to allow a visitor or staff member to take your picture. You can give the completed form to any unit staff member.

Consent to Withdrawal of Funds from Patient Trust Accounts

This form, commonly called a money-draw form, is used to withdraw money from your OSH trust account, if you have one. You can turn in the completed form to any unit staff member. See the "Patient funds" section of this handbook for more information.

Grievance Form (used for levels 1 through 3)

This form is used when you have a problem or concern about your treatment that you have not been able to resolve by talking to staff. Place your completed form in the "Grievance Box" located on your unit. See the "Grievances" section of this handbook for more information.

Package Request

In some programs, you must complete this form before you can request or receive a package. This form is not required in the Crossroads and Springs programs; it may be optional within other programs. Unit staff will let you know when you are required to complete this form, which you can submit to any staff member.

Pass and Outing Requests

A pass is when you temporarily leave the hospital under the supervision of a non-staff member, such as a family member or friend who passed the hospital's criminal background check.

An outing is when you temporarily leave the hospital with a hospital staff member.

Different programs use these forms for different reasons. For example, you can use the form to go on an outing you feel would benefit your recovery but is unrelated to your Treatment Mall classes. Or you could use the form to go on a pass with an approved friend.

Some patients, because of their commitment status, are not allowed to go on passes or outings.

Patient forms continued

And some programs, like the Springs Program, choose not to require either of these forms.

Unit staff can let you know if you can go on outings and passes. They can also tell you when and if you must complete one of these forms. You may submit the completed forms to any staff member.

Request for Access to Records

Use this form when you want to view your medical record. You can return completed forms to unit staff or to a member of your treatment team. See the “Accessing your medical records” section of this handbook for more information.



UNDER PSRB: GENERAL INFO

Emergency codes

During your stay in the hospital, you may hear codes called over the intercom.

The most common codes include:

- Code Red for fire
- Code Blue for medical distress
- Code Green for a behavioral emergency

When codes are called, staff want to make sure you are accounted for and safe. Please help by following staff instructions during the code. Staff know that hearing a code can be distressing. They are there to offer any help or support you may need.

For additional questions or concerns, talk to your unit staff.

UNDER PSRB: GENERAL INFO

Seclusion and restraint

OSH staff care about keeping you, other patients and themselves safe. If staff believe you are in immediate danger of hurting yourself or someone else, they may use temporary seclusion or restraints. Staff will use seclusion or restraints only as a last resort when they have already tried everything else.

If you are in seclusion or restraints, a staff member will be with you the entire time to ensure your needs – such as eating meals or going to the bathroom – are met. The seclusion or restraints will end as soon as everyone is safe.

If you are placed in restraints, you will be secured to a bed to restrict your movements until you can be safe on your own and around others. If you are placed in seclusion, you will be restricted to a secure room until you can be safe around others.

After you are no longer in seclusion or restraints, staff will check in with you to talk about what happened and what you and they can do better in the future.

Notifications

You have the right to have the hospital notify your friends or family if you are ever placed in seclusion or restraints. If you want them notified, please fill out the Disclosure of Hospitalization form and the Release of Information form you received when you were admitted. If needed, staff can give you copies of these forms.

More information on the disclosure and release of information forms are found in the confidentiality section of your handbook.

Additional information

If another patient ever becomes upset or loses control, staff may ask you to leave the area. For your safety, you can go to your room or a common area, or ask staff for direction.

For more information on seclusion and restraints, or to review a copy of the policy, please contact any staff member.



UNDER PSRB: RESOURCES

Resources

Resources within the hospital

If you have questions about the services and care you receive at the hospital, staff are available to help.

• Consumer and Family Services

This team will work closely with you and your family to answer questions about the hospital, provide education and support, and give assistance with issues or concerns.

- ▶ Salem: 503-947-8109
- ▶ Junction City: 541-465-2785

• Peer Recovery Services

This is a team of people who have lived experiences with the mental health and addiction system and are trained to offer you peer support. They promote and support person-directed treatment and recovery through advocacy and community relationship building.

- ▶ Director: 503-947-1098

• Peer Advisory Council (PAC)

The PAC's role is to improve the hospital's culture, policies and processes. You are welcome to attend regular meetings and bring hospital-wide patient issues to the attention of hospital administrators. For more information, and to inquire about joining the PAC, contact:

- ▶ PAC Coordinator: 503-490-4066

• Benefit Coordinators Unit

Benefit coordinators can help you apply for federal, state and public or private benefits. They can also help you learn which benefits you are eligible to receive.

For questions about benefits, call:

- ▶ Salem: 503-947-2522
- ▶ Junction City: 541-465-2729

• Patient Financial Services

This department will help you reduce your cost of care at the hospital, so you can focus on your recovery. Staff will help you understand our governing laws, advocate on your behalf to insurance companies, bill insurance companies for covered services, and determine how much you can afford to pay by considering your unique financial situation.

- ▶ Salem and Junction City: 503-947-0244

• Patient Trust Department

OSH will provide a trust account for your use if you have an income, or friends or family who wish to deposit money for your personal use. See the section on Patient Funds for more information. For questions about patient trust accounts, call:

- ▶ Salem and Junction City: 503-947-1075



Resources continued

• Spiritual Care and Native Services

The hospital honors all people's spiritual beliefs. Contact Spiritual Care and Native Services for a schedule of treatment mall classes, spiritual gatherings, a meeting with a chaplain, or to be connected with a leader of your faith.

- ▶ Salem Spiritual Care Office: 503-945-2962
- ▶ Junction City Spiritual Care Office: 541-465-3040

The on-call chaplain can be reached 24/7 by calling Reception at:

- ▶ Salem: 503-945-2800
- ▶ Junction City: 541-465-2554

• Vocational and Educational Services

To help you prepare for life outside the hospital, these staff members offer opportunities to help you further your education and gain job skills.

- ▶ Salem: 503-945-2884
- ▶ Junction City: 541-465-2827

Resources outside the hospital

• Office of Training, Investigations and Safety (OTIS)

All allegations of abuse and mistreatment at OSH are sent to OTIS for screening and possible investigation. You, staff or the public can call:

- ▶ 503-689-5076 or 800-406-4287

• Disability Rights Oregon (DRO)

DRO's mission is "to promote and defend the rights of individuals with disabilities." Depending on the nature of your concern and DRO's staff capacity, DRO staff may be able to talk with you on the phone.

- ▶ 503-243-2081 or 800-452-1694

• Health Care Regulation and Quality Improvement (HCRQI)

The HCRQI program regulates health care facilities, providers and suppliers in acute care and community-based programs. The HCRQI program is part of the Center for Health Protection in the Public Health Division of the Oregon Health Authority. Complaints concerning your rights related to 42 CFR 482.13 may be filed by contacting:

- ▶ Health Care Regulation and Quality Improvement
800 NW Oregon Street Suite 305
Portland, OR 97232
- ▶ 971-673-0540

• Salem Human Rights Commission-

The Salem Human Rights Commission advises the Salem City Council on human rights and relations issues. The board assists residents by hearing and resolving discrimination complaints and promoting harmony. Note: There is no human rights commission in Junction City.

- ▶ 503-540-2371

• The Joint Commission (TJC)

TJC makes sure the hospital meets national standards on health care.

- ▶ 800-994-6610

• Centers for Medicare & Medicaid Services (CMS)

CMS, a part of the U.S. Department of Health and Human Services, oversees the funding for many federal health care programs and reimburses health care organizations for the services they deliver.

- ▶ 800-447-8477

UNDER PSRB: RESOURCES

List of acronyms and abbreviations

This list of acronyms and abbreviations is designed to help patients navigate through their experience at Oregon State Hospital. Community providers also use many of these terms.

370	ORS 161.370 Determination	CI	Continuous Improvement (form to submit improvement ideas)
426	ORS 426 Persons with mental illness; dangerous persons	CM	Case Monitor/Manager (Salem only)
AA	Alcoholics Anonymous	CMS	Center for Medicaid and Medicare Services
ACT	Assertive Community Treatment or Acceptance and Commitment Therapy	CNA	Certified Nursing Assistant
ADA	Americans with Disabilities Act	CPS	Collaborative Problem Solving
ADL	Activities of Daily Living	CR	Conditional Release
ACE	Adverse Childhood Experience	DASH	Dietary Approaches to Stop Hypertension
AFH	Adult Foster Home (no more than five residents)	DBT	Dialectical Behavior Therapy
APD	Aging and People with Disabilities	DDA	Dual Diagnosis Anonymous
BHS	Behavioral Health Specialist	DHS	Department of Human Services
BMI	Body Mass Index	DNR	Do not resuscitate
BSP	Behavior Support Plan	DNS	Director of Nursing Services
Bx	Behavior	DOH	Disclosure of Hospitalization
CAT	Clinical Advisory Team	DOJ	Department of Justice (federal)
CBT	Cognitive Behavioral Therapy	DRO	Disability Rights Oregon
CC	Civil Commitment (classification for admission)	DSM-5	Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition
CCO	Coordinated Care Organization	Dx	Diagnosis
CFS	Consumer and Family Services	EBP	Evidence-Based Practice

List of acronyms and abbreviations continued

ECT	Electroconvulsive Therapy	NM	Nurse Manager
EVS	Environmental Services	OARs	Oregon Administrative Rules (state regulations)
FES	Forensic Evaluation Services	OCA	Office of Consumer Activities
FNS	Food and Nutrition Services	OCAC	Oregon Consumer Advisory Council
GEI	Guilty Except for Insanity (classification for admission)	OCR	Office of Civil Rights (federal)
HIPAA	Health Information Portability and Accountability Act	ODOJ	Oregon Department of Justice
Hx	History	OHP	Oregon Health Plan
IDT	Interdisciplinary Treatment Team	OHSU	Oregon Health and Science University
JC	OSH Junction City Campus	OHA	Oregon Health Authority
JD	Jurisdictional Discharge	ORS	Oregon Revised Statutes (Oregon laws)
LAT	Leadership Action Team (Junction City Campus only)	OSH	Oregon State Hospital
LPN	License Practical Nurse	OSHA	Occupational Safety Health Administration
MHST	Mental Health Security Technician	OSP	Oregon State Police or Oregon State Penitentiary
MHT2	Mental Health Therapist 2	OT	Occupational Therapy or Overtime
MHT	Mental Health Therapist	OTIS	Office of Training Investigation and Safety (Formerly OA API)
MHTC	Mental Health Therapy Coordinator	PAC	Peer Advisory Council
MHTT	Mental Health Therapy Tech	PACF	PAC Facilitator
MT	Music Therapist	PCP	Primary Care Provider
MTA	Music Therapist Assistant	PD	Personality Disorder
NA	Narcotics Anonymous	PDS	Peer-Delivered Services
NAMI	National Alliance on Mental Illness	PET	Program Executive Team
NOC	Night (Nocturnal) Shift	PLURAL	Peace Love Unity Respect Autonomy Liberty (LGBTQI+)

List of acronyms and abbreviations continued

PMHNP	Psychiatric Mental Health Nurse Practitioner (psychiatric medication and treatment provider)	SRTF	Secure Residential Treatment Facility (usually community based; also includes placements within OSH)
PO	Medication taken orally (by mouth)	SSDI	Social Security Disability Income
PRN	As Needed (often medication)	SSI	Social Security Income
PNM	Program Nurse Manager	START	Short Term Assessment of Risk and Treatability
PRS	Peer Recovery Services (department); Peer Recovery Specialist (staff)	STR	Secure Transport Restraint
PSRB	Psychiatric Security Review Board	SW	Social Worker
PSS	Peer Support Specialist	TB	Tuberculosis
PT	Physical Therapy	TCP	Treatment Care Plan
PWS	Peer Wellness Specialist	TCPS	Treatment Care Plan Specialist
QMHA	Qualified Mental Health Associate	TIA	Trauma-Informed Approach
QMHP	Qualified Mental Health Professional	TIC	Trauma-Informed Care
REACH	Recovery Environments Actively Creating Hope (program-specific incentive system)	TIO	Trauma-Informed Oregon (organization)
RI	Recovery International	TJC	The Joint Commission
ROI	Release of Information	TOTO	Theatre of the Oppressed
RPI	Rapid Process Improvement	TSI	Thinking Skills Inventory
RR	Risk Review	Tx	Treatment
RSD	Rehabilitation Services Department	VOC	Vocational Support (inside and outside OSH)
RTC	Residential Treatment Center	VRA	Violence Risk Assessment
RTF	Residential Treatment Facility (six to 16 residents)		
RTH	Residential Treatment Home (no more than five residents)		

UNDER PSRB: RESOURCES

Phone numbers

Program director and nursing station numbers:

Crossroads		Pathways	
Program director	503-945-2800*	Program director	503-945-2800*
Leaf 3	503-947-2724	Bird 1	503-947-3734
Flower 1	503-947-2714	Bird 2	503-947-8118
Flower 2	503-947-2744	Bird 3	503-947-3754
Harbors		Bridges	
Program director	503-945-2800*	Program director	503-945-2800*
Anchor 1	503-947-4264	Bridge 1	503-947-3764
Anchor 2	503-947-4266	Bridge 2	503-947-3774
Anchor 3	503-947-4267	Bridge 3	503-947-3784
Lighthouse 1	503-947-4268	Springs	
Lighthouse 2	503-947-4281	Program director	503-945-2800*
Lighthouse 3	503-947-4288	Butterfly 1	503-947-3704
Archways		Butterfly 2	503-947-3714
Program director	503-945-2800*	Butterfly 3	503-947-3724
Flower 3	503-947-2754	Junction City	
Leaf 1	503-947-2704	Program director	541-465-2554*
Leaf 2	503-947-2734	Mountain 1	541-465-2704
Tree 1	503-947-2764	Mountain 2	541-465-2714
Tree 2	503-947-2774	Mountain 3	541-465-2472
Tree 3	503-947-2784	Forest 2	541-465-2744
Rivers Run			
		Program manager	541-465-2554*
		Rivers Run 1	541-465-2925
		Rivers Run 2	541-465-2858

* To contact a program director, call Reception at 503-945-2800 (Salem) or 541-465-2554 (Junction City).

UNDER PSRB: RESOURCES**Unit phone numbers****Crossroads**

Leaf 3	503-947-2485	503-947-2484
Flower 1	503-947-2487	503-947-2486
Flower 2	503-947-2489	503-947-2488

Harbors

Anchor 1	503-945-8848	503-945-9741	503-945-9473	503-945-9743
Anchor 2	503-945-9782	503-945-9790	503-945-9796	
Anchor 3	503-945-9804	503-945-9807	503-945-9836	
Lighthouse 1	503-945-9846	503-945-9867	503-945-9861	
Lighthouse 2	503-945-9876	503-945-9898	503-945-9889	
Lighthouse 3	503-945-9904	503-945-9925	503-945-9916	

Archways

Flower 3	503-947-2491	503-947-2490
Leaf 1	503-947-2481	503-947-2480
Leaf 2	503-947-2483	503-947-2482
Tree 1	503-947-2493	503-947-2492
Tree 2	503-947-2495	503-947-2494
Tree 3	503-947-2497	503-947-2496

Pathways

Bird 1	503-947-2552	503-947-2551	
Bird 2	503-947-8100	503-947-8101	
Bird 3	503-947-2553	503-947-3658	503-947-2554

Bridges

Bridge 1	503-947-3650	503-947-3651
Bridge 2	503-947-3652	503-947-3653
Bridge 3	503-947-3654	503-947-3655

Springs

Butterfly 1	503-947-3659
Butterfly 2	503-947-3660
Butterfly 3	503-947-3661

Junction City

Mountain 1	541-465-2688	541-465-2689
Mountain 2	541-465-2690	541-465-2691
Mountain 3	541-465-2692	541-465-2693
Forest 2	541-465-2696	541-465-2697

Note: These phones are answered by patients. Please ask for the person you want to talk to and the person who answers the phone will get them for you. Patient phones are turned off at certain times of the day, including treatment mall hours and late night hours. These times vary by unit.

Rivers Run

Rivers Run 1	541-465-2682
Rivers Run 2	541-465-3006

EXHIBIT B

Oregon State Hospital – Salem

2600 Center St. NE

Salem, OR 97301

Reception: 503-945-2800

Toll free: 800-544-7078

Oregon State Hospital – Junction City

29398 Recovery Way

Junction City, OR 97448

Reception: 541-465-2554

Toll free: 877-851-7330

This document can be provided upon request in an alternative format for individuals with disabilities or in a language other than English. To request this publication in another format or language, please send an e-mail to osh.interpreterservices@dhaoha.state.or.us or call 503-756-7889 (voice) or 711 (TTY) to arrange for the alternative format.

Disclaimer: This document is updated each winter.
Please talk to staff for information on recent policy changes that affect the contents of this guide.

